Family Communication Patterns, Emotion Regulation, and Coping Behaviors in Young Adults

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FAMILY COMMUNICATION PATTERNS, EMOTION REGULATION, 
AND COPING BEHAVIORS IN YOUNG ADULTS 

by 

Caleb J. Price 

A thesis submitted in partial fulfillment 

of the requirements for the degree 

of 

MASTER OF SCIENCE 

in 

Human Development and Family Studies 

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Logan, Utah 

2023
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ABSTRACT

Family Communication Patterns, Emotion Regulation, and Coping Behaviors in Young Adults

by

Caleb J. Price, Master of Science
Utah State University, 2023

Major Professor: Dr. Diana Meter
Department: Human Development and Family Studies

The present study explores the direct and indirect effects of family communication patterns (FCP) on five common coping behaviors (drinking alcohol, watching TV, masturbating, eating, and exercising) through emotion regulation strategies (reappraisal and suppression). All measures were self-reported, and participants were asked to report their retrospective perceptions of FCP during adolescence. The cross-sectional data used for this study was collected via an online survey from 504 young adults (ages 18 to 30), living across the United States, who were raised in first-marriage households. Participants were predominantly women, but the sample was diverse with regards to education and income level, and reasonably representative of the general U.S. population in terms of race (75% White, 12% Black/African American, 5% Middle Eastern/Asian, 5% Latino, 2% other). A series of path analyses revealed a pattern of indirect effects of conformity orientation through suppression on coping behaviors that
may be considered avoidant: drinking alcohol, watching TV, masturbating, and eating.

Both conversation and conformity orientation were positively associated with reappraisal, and exercise was the only coping behavior related to reappraisal. Young adults who grew up in families high in conformity orientation may be more likely to suppress their emotions, and subsequently, cope through behaviors which can be considered avoidant.

Because conformity orientation was linked with both reappraisal and suppression, future research should seek to disentangle the relationships between these variables and identify additional variables which may moderate these associations.

(87 pages)
Family communication establishes expectations for a variety of behaviors, including emotion expression. This study explored if patterns of family communication were related to five behaviors that young adults might use to cope (drinking alcohol, watching TV, masturbating, eating, and exercising) via emotion regulation strategies. The data used for this study came from 504 young adults living across the United States who completed an online survey which asked them questions about how their family communicated when they were adolescents, their emotion regulation strategies, and how often they use the five coping behaviors listed above. The participants were between 18 and 30 years old and were raised in first-marriage families (i.e. households with two married parents who were not separated/divorced before the child reached age 18).

We measured two emotion regulation strategies: reappraisal and suppression. Reappraisal refers to managing emotion by changing the way one thinks about a situation. Suppression, meanwhile, is not expressing one’s emotions. Although both strategies can be appropriate depending on the circumstances, reappraisal is generally associated with positive mental health, while frequent suppression has been linked to negative outcomes.
Our results indicated that young adults who grew up in families whose communication emphasized uniformity in beliefs and values (i.e., high in conformity orientation), while controlling for conversation orientation, engaged in more suppression. Suppression was related to coping through behaviors that might indicate one is coping in ways that avoid their problems (drinking, watching TV, masturbating, and eating). Young adults who reported that their family had frequent and open communication about a wide variety of topics (i.e., high in conversation orientation), while controlling for conformity orientation, tended to manage their emotions through reappraisal. Contrary to our predictions, conformity orientation was also related to reappraisal. In other words, some young adults from families high in conformity orientation may frequently use both reappraisal and suppression. Because suppression can lead to avoidant coping behaviors and/or negative outcomes, future research should try to investigate what additional factors impact the likelihood of suppression. This research could help families — especially those high in conformity orientation — learn strategies for protecting against excessive suppression.
What a joy it is to briefly write in my own voice outside the constraints of academically pedantic semantics! As a child, I often dreamed of becoming a professional basketball player. You may have reasonably surmised by now that these hopes of athletic excellence remain unfulfilled. Instead, this work is mayhap more of a metaphorical descendant of my youthful writings which reflected aspirations for authorhood. Of course, I envisioned penning compelling fantasy novels, but here we are.

It is conceivable that you have already rolled your internal eyes at me for including such a silly paragraph (if that is the case, I might suggest that you skip ahead to the final paragraph), but I would request that you indulge me in revealing a small bit of the real-life human who was the primary writer of this thesis. A thesis, which in the typical “style” of academia, is sterile and detached. There are certainly valid reasons for this. I, myself, admire precise language across many contexts, but do not be fooled! Behind every work of “objective” science is a person who can only comprehend a fraction of themselves, let alone the phenomena they are attempting to describe. I do not mean to say that science/research is not valuable. While people are complex, I do not believe that they are entirely incomprehensible. For example, there is a next-to-nothing chance that you happened upon this document willy-nilly. Realistically, there is also a next-to-nothing chance (certainly statistically significant) that you — a person in the world — would be reading this at all. This means that if you are reading this, a long chain of sequences in your personal story led you to do so. Understanding this, you must also
recognize that a long chain of sequences in my personal story led me to write this thesis, and this reality shouldn’t be forgotten.

My decision to enroll in graduate school was based on intuitive and spiritual inklings more so than traditionally sound logic. I was shockingly ignorant as to what graduate school actually entailed, but it felt like the right thing to do. I wanted to do something meaningful. I wanted to learn and expand my capacities so as to be of greater benefit to my fellow men. In the midst of such noble longings, I was equally enticed by the hedonistic notion that graduate school appeared an attractive alternative to nine-to-five drudgery. As it happens, the thesis I planned to write for many months did not come to fruition. Plot twists in my personal story led me to write this one instead. I sincerely hope that it is of some use to society.

Up to this point, I have been referring to our “personal” stories. And, indeed, each one of us do have a personal story. Fortunately, however, our personal stories are heavily influenced by others. A constellation of companions, colleagues, compatriots, and distant contacts (a friend of a friend) impact our journeys in ways big and small.

I am thoroughly indebted to the generous, and lightning-fast email responder, Dr. Diana Meter. Her encouragement and mentorship have been invaluable. Her unwavering belief propelled me to persevere through times of doubt. I am also thankful to my other committee members, Drs. Elizabeth Fauth and Sarah Tulane. I appreciate their kind words and dispositions, in addition to their expertise which has been crucial in the process of the molding of this thesis into its final form. I am grateful for my sweet wife, Camilla, who celebrates my successes and supports me in moments of discouragement in
matters both related and unrelated to this thesis. I am grateful for a long list of people who have shaped me and impacted my story: my parents, siblings, grandparents, nieces, nephew, aunts, uncles, cousins, in-laws, friends, mentors, ang mga kapatid kong Pinoy, Dr. James Naismith, and many others. Finally, I am thankful for the funding provided by Utah State’s School of Graduate Studies and the College of Education and Human Services; these resources allowed me to conduct higher quality work than would have been possible otherwise.

Caleb J. Price
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CHAPTER I
INTRODUCTION

Communication has long been recognized as impactful for individual development and an important component of family functioning. One framework that emphasizes the importance of communication is Family Communication Patterns Theory (Koerner & Fitzpatrick, 2002a). This theory proposes that families develop and use relatively consistent patterns of communication to create a shared social reality. Two key dimensions of family communication patterns (FCP) are conversation orientation (the degree to which FCP encourage frequent and open dialogue), and conformity orientation (the degree to which FCP encourage homogeneity in beliefs and values). FCP have been a powerful research tool in understanding a number of phenomena including information processing, psychosocial outcomes, and behaviors (Schrodt et al., 2008).

FCP establish expectations for behaviors including the expression or suppression of emotions (Weinzapfel & Schrodt, 2022). The present research seeks to replicate and expound upon the work of Shimkowski (2016) who found that suppressing emotions mediated the relationship between college students’ perceptions of conformity orientation and drinking alcohol as a coping strategy. The purpose of this study is to examine the relationships between young adults’ retrospective perceptions of FCP during adolescence, and five specific coping behaviors which are common among young adults: drinking alcohol (Kenney et al., 2018), watching TV (Schramm & Cohen, 2017), masturbating (Rowland et al., 2020), eating (Jackson et al., 2003), and exercising (Cairney et al.,
mediated by emotion regulation strategies (i.e., suppression or reappraising emotions).

This study contributes to the existing literature in several ways. Previous FCP research has been over-reliant on college student samples, limiting its generalizability (Horstman et al., 2018). Broader applicability of results is achieved by surveying a national sample of young adults from first-marriage families (i.e. households with two married parents who were not separated/divorced before the child reached age 18), including those not attending college. In addition to replicating the findings of Shimkowski (2016), which connected FCP and drinking to cope, this study adds to the literature by determining if FCP are related to other specific coping behaviors and if these relationships are mediated by emotion regulation strategies. A model connecting FCP to coping behaviors via emotion regulation could be useful in understanding a myriad of coping behaviors outside the scope of this study (e.g., conformity orientation predicts emotion suppression which predicts coping behaviors). Furthermore, this study supplements a new line of FCP research by following the recommendation of Horstman et al. (2018) to utilize an improved scale for measuring conformity orientation. Finally, this study deviates from the prevailing FCP methodology by measuring young adults’ retrospective, not current, reports of FCP. Because young adulthood is characterized by increased autonomy, independence, and detachment from family (Ryan & Lynch, 1989), changes in communication patterns from adolescence to young adulthood are normative (Aquilino, 1997). Understanding how FCP during formative years may impact outcomes for adults is a fertile area for future research.
CHAPTER II
LITERATURE REVIEW

This chapter reviews the existing literature on the theoretical underpinnings of this study, family communication patterns, emotion regulation and coping, and a sample of common coping behaviors among young adults (drinking alcohol, watching TV, masturbating, eating, and exercising).

Family Communication Patterns Theory

Literature on family communication patterns (FCP) has its origins in the work of McLeod and Chaffee (1972). They proposed that individuals create shared social realities through communication in a process called coorientation. Given that interpersonal communication has both relational and content components, they presented two corresponding communicative dimensions. Socio-orientation refers to the tendency to focus on social positioning, and emphasizes deference in an effort to maintain harmonious relationships. Meanwhile, concept-orientation describes the prioritization of analyzing arguments on the basis of their merits, irrespective of the speaker’s status. McLeod and Chaffee focused their efforts on exploring these dimensions in parent-child communication and the impact of these dimensions on the processing of mass media. For example, we might expect a child from a more socio-oriented family to give more credence to the person delivering a message (e.g., an authority figure or celebrity) rather than the message’s inherent persuasiveness.
Ritchie and Fitzpatrick (1990) advanced FCP research by critiquing previous theoretical assumptions and broadening its scope beyond a focus on mass media synthesis. They challenged the notion that individual family members are totally aligned in their views of family processes, and indeed showed that children, mothers, and fathers varied in their reports of FCP. Furthermore, arguing that the original concept-orientation (not socio-orientation) construct was more predictive of relational harmony, they reconceptualized socio-orientation as *conformity orientation* because it more accurately reflected the use of parental control to enforce children’s conformity, especially in assigning meaning to objects (Koerner & Schrodt, 2014). Similarly, concept-orientation was re-termed *conversation orientation*. In accompaniment with these adjustments, they introduced the revised Family Communication Patterns (RFCP) instrument designed to measure individual perceptions of the family communicative environment, specifically conversation orientation and conformity orientation.

Koerner and Fitzpatrick (2002a) expanded the understanding of FCP by elaborating a theory of family communication, sometimes called Family Communication Patterns Theory (FCPT). The primary tenet of this theory is that “relatively stable” family-level relational schemata are created through family members’ social interactions (p. 82). These schemata guide communication and aid in the creation of a shared understanding of what “family” is and does. Two of the most important beliefs inherent in FCP are represented in the constructs of conversation orientation and conformity orientation.
**Conversation Orientation**

Conversation orientation may be understood as the degree to which family members are encouraged to speak frequently and openly about a broad array of topics (Koerner & Fitzpatrick, 2002b). Families at the high end of this dimension are described as spending a good deal of time spontaneously interacting with each other, freely expressing their opinions, feelings, and thoughts on many topics. Plans and decisions which include the family acting as a unit are discussed with all family members. Parents hold the exchange of ideas in high regard and see communication as the primary method for the education and socialization of their children. In contrast, families at the low end of the conversation orientation dimension rarely share their private ideas, activities, and emotions. Dialogue is less frequent and the number of topics for conversation is limited. When decisions are made concerning the whole family, not everyone’s input is sought after, nor are these choices addressed in much detail.

**Conformity Orientation**

Conformity orientation describes the extent to which family communication engenders a climate of uniformity in values and beliefs (Koerner & Fitzpatrick, 2002b). Families at the high end of this dimension avoid conflict. Instead, interactions stress family members’ conformity and interdependence. Parental communication emphasizes children’s obedience, including to other, non-parental authority figures. At the opposing end of the spectrum, the interactions of families low in conformity orientation value individuality, all family members are seen as equal, discrepant beliefs are accepted, and children are encouraged to develop their independence.
Family Types

FCPT follows the classical typology of McLeod and Chaffee’s (1972) FCP (Koerner & Schrodt, 2014; Koerner & Fitzpatrick, 2002a). In considering both dimensions as either high or low, families may be classified into one of four types. Families who score high on both scales are deemed consensual. Families high in conversation orientation, but low in conformity orientation are pluralistic. Families low in conversation orientation, but high in conformity orientation are protective. Finally, families low on both scales are dubbed laissez-faire. While these typologies constitute a helpful conceptual tool, most scholars focus on analyzing the two dimensions, conversation orientation and conformity orientation, as continuous variables — rather than grouping participants into types — because of the advantages for statistical analysis (Rauscher et al., 2020).

FCP Research and Recent Developments

FCPT has proven to be a powerful research tool for family communication scholars considering a variety of outcomes. For example, FCP have been linked to resiliency (Dorrance Hall et al., 2021), reticence (Keaten & Kelly, 2008), financial literacy (Hanson & Olson, 2018), and many other constructs. A meta-analysis conducted by Schrodt et al. (2008) concluded that conversation orientation tended to be associated with positive outcomes for children, particularly psychosocial wellbeing. Findings surrounding conformity orientation, however, were more mixed, and it was determined to be a weaker overall predictor. Conversation and conformity orientation have consistently been shown to be inversely related (Horstman et al., 2018; Keating, 2016; Koerner &
Schrodt, 2014). But, in critiquing the RFCP’s prevailing operationalization, Koerner and Schrodt (2014) warned scholars not to default to a simplistic, negative view of conformity orientation. In addition to using outdated language, they argued that the conformity orientation subscale failed to capture the orientation’s theoretical and conceptual richness. They also argued that by asking questions which focused on the restrictive nature of conformity orientation, the RFCP was inadequate in addressing the potential value of “tough love” and shared values (p. 12). Indeed, Schrodt and Ledbetter (2007) illustrated that low conformity could represent freedom or “complete entropy” while high conformity could reflect “order and structure or stifling rigidity” (p.349).

Responding to the call for improved operationalization, Horstman et al. (2018) constructed and validated the Expanded Conformity Orientation Scale (ECOS) which is comprised of the following four dimensions which more fully encapsulate the nuance of conformity orientation: respecting parental authority, experiencing parental control, adopting parents’ values/beliefs, and questioning parents’ beliefs/authority.

Another critique of previous FCP research is its dependency on samples comprised of college students, limiting its generalizability (Horstman et al., 2018). Notably, only 40 percent of 18-to-24-year-old young adults in the U.S. are enrolled in college (National Center for Education Statistics, 2021). This work seeks to supplement the literature by following the counsel of leading FCP scholars to sample more broadly and utilize the more theoretically sound ECOS.
A Note on FCP Methodology: Current vs. Retrospective Reports

While research concerning open parent-child communication tends to point to positive outcomes, the situation may be more nuanced for young adults in comparison to younger children. Some research suggests that the benefits of open communication may be moderated by contextual factors. For example, Givertz and Segrin (2014) found that among young adults who had controlling parents, open parent-child communication actually exacerbated problems with self-efficacy and entitlement. One may theorize that the effect of conversation orientation on children differs depending on their developmental stage. In other words, parent-child communication that is decreasingly open as one enters young adulthood may reflect a healthy developmental change.

Unfortunately, communication research examining young adults using the RFCP typically inquires about young adults’ present communication climate (e.g., Taniguchi & Thompson, 2015). This means survey responses correspond with current perceptions of communication, typically during one’s early 20s, as opposed to communication during earlier years (i.e., childhood and adolescence). One may reasonably theorize that questions phrased to measure retrospective perceptions of communication would yield different results. The current research asked participants to report their retrospective perceptions of FCP during adolescence, a stage in which Piaget proposed children may begin to grapple with important abstract ideas and values (Crain, 2011) that would likely shape future behavior.
Emotion Regulation

While young adults’ development allows for enhanced emotion regulation abilities, these skills can be challenged by novel experiences and responsibilities, often with reduced parental support (Gross et al., 2015). Gross et al. (2006) define emotion regulation as efforts people make “to influence which emotions they have, when they have them, and how these emotions are experienced and expressed” (p. 14). The most prevalent model for understanding and researching emotion regulation is Gross’ (1998) process model (Dryman & Heimberg, 2018). This model illustrates emotion formation as a series of sequential events. An individual in a given situation focuses on, and then evaluates the situation according to their goals. Then, an emotional response is enacted which alters the situation and restarts the cycle.

Two commonly studied strategies for regulating emotion are reappraisal (or cognitive reappraisal) and suppression (or expressive suppression). Reappraisal is defined as changing the way one thinks about an emotion-eliciting situation so as to alter its emotional impact (Gross & John, 2003). For example, a student nervous about enrolling at an unfamiliar school may reappraise the situation as a great opportunity to meet new and interesting people. In contrast, suppression refers to inhibiting the expression of emotions. Though one may suppress or reappraise positive emotions (e.g., maintaining a “poker face”), evidence suggests people regulate negative emotions far more frequently (Gross et al., 2006).

Traditionally, reappraisal has been deemed “adaptive” and suppression “maladaptive.” However, scholars have recently stressed the importance of considering
context when determining the effectiveness of emotion regulation strategies (Aldao, 2013; Brockman et al., 2017; Gross et al., 2015). In support of this perspective, Troy et al. (2013) found that reappraisal was associated with lower levels of depression in people dealing with stressors outside of their control. However, when stressors were perceived to be more controllable, reappraisal was related to increased levels of depression. Similarly, the results of Brockman et al. (2017), using daily diary methods, found mixed and complex relationships between emotion regulation strategies and mental wellbeing.

While recognizing the need to account for context, especially considering day-to-day events, trait suppression has generally been linked to negative outcomes and trait reappraisal has been linked to mostly positive outcomes. A systematic review conducted by Dryman and Heimberg (2018) concluded that suppression is connected to social anxiety, and the underuse of reappraisal is strongly associated with depression. Longitudinally, suppression is predictive of lower life satisfaction while reappraisal predicts both greater psychological wellbeing and less distress (Brewer et al., 2016). Because reappraisal occurs earlier in the emotion production process, it comes before emotions are fully formed, and thus requires less cognitive resources. Contrastingly, suppression comes later in the process, necessitating an effortful masking of emotion which causes more cognitive stress, weakened memory, and increased cardiovascular activity (Butler et al., 2003; Gross et al., 2015; Richards & Gross, 1999). In other words, while outward exhibitions of emotion may be reduced, there can remain inner turmoil and even a sense of inauthenticity associated with suppressing emotions, especially in social situations (Dryman & Heimberg, 2018). It is these trends that led Gross et al. (2015) to
refer to suppression as “generally maladaptive,” and reappraisal as “generally adaptive” (p. 19).

**Emotion Regulation and Coping**

The literature on coping is vast but disjointed. Coping lacks a consensus definition among scholars (Compas et al., 2014). Relatedly, in a review published two decades ago, Skinner et al. (2003) determined over 400 subtypes of coping had been studied. The operationalization and classification of various coping-related constructs are similarly diffuse. While emotion regulation and coping have largely represented two distinct topical areas, Compas et al. (2017) conducted a meta-analysis and narrative review to synthesize research (212 articles and 87 unique measures) which included measures of both emotion regulation and coping. They argue that while similar and overlapping conceptually, most scholars concur about some distinctions between the two. Though both are regulatory processes, coping specifically takes place in response to stressors while emotion regulation may correspond with the presence of any emotion, stressful or not. Additionally, coping refers solely to controlled and conscious responses while emotion regulation may include both controlled and automatic, involuntary responses. Acknowledging their considerable similarity, Compas et al. (2017) argued that clearly delineating emotion regulation from coping was not necessary until further empirical distinctions are made.

Young adulthood is a period often characterized by unprecedented independence and obligations. As such, it is critical that young adults learn to overcome stressors and manage their emotions. Habitual emotion regulation strategies impact wellbeing (Aldao
et al., 2010; Schäfer et al., 2017). Consequently, this work seeks to contribute to the literature by exploring potential relationships between FCP, emotion regulation (i.e., suppression and appraisal), and coping behaviors. While recognizing that young adults may participate in an almost infinite number of behaviors to cope, this research elects to focus on theoretically relevant, specific behaviors used to cope, with existing validated scales, which are plausibly salient among young adults: drinking alcohol, watching TV, masturbating, eating, and exercising.

**Family Communication Patterns, Emotion Regulation, and Coping Behaviors**

FCPT suggests that families coorient through social interactions to create a (more or less) shared reality (Koerner & Schrodt, 2014). Therefore, we can expect that patterns of interaction within the family contribute to an understanding of emotions and shared expectations for their expression. Limited but budding research exists on the relationship between FCP and emotion regulation. For example, Jones et al. (2017), in a sample of college students, found that, unsurprisingly, conversation orientation was negatively correlated with suppression. Similarly, conversation orientation has also been shown to be inversely related to young adults’ emotional labor (efforts to exhibit what is perceived to be the socially desired emotion instead of true feelings) in interactions with their parents (Schrodt, 2020). FCPT proposes that families high in conversation orientation speak freely and frequently about a multitude of topics, including their emotions. This open dialogue is associated with higher emotional intelligence (Keaten & Kelly, 2008), and an expectation that the family can be relied on for help in times of distress.
This willingness to express and not suppress emotion by reaching out to others extends beyond the family as young adults gain more independence. High and Scharp (2015) concluded that college students from families high in conversation orientation possessed both high motivation and ability to seek social support.

Conformity orientation promotes homogeneity of beliefs and attitudes. As a result, we can theorize that children who come from families high in this orientation may mask their emotions when they are not aligned with what they believe their parents desire. Empirical results support this link between conversation orientation and suppression (Jones et al., 2017; Schrodt, 2020). This hiding of emotion likely occurs in times of coping with negative feelings. In a recent study, three of the four dimensions of the ECOS were positively related to expectations that coping would include following parental examples of coping, “pretend[ing] you’re ok” and “avoid[ing] outside help” (Weinzapfel & Schrodt, 2022, p. 121); these coping expectations were also associated with lower levels of self-esteem and family satisfaction.

Young adults from families high in conformity orientation may be less equipped to seek out and receive social support. While college students from these families had similar levels of motivation to seek social support, they had comparatively fewer skills to enable them to do so (High & Scharp, 2015). This finding is bolstered by Jones et al. (2017) who found that college students raised in families higher in conformity orientation suppressed their emotion more often, and subsequently, had more difficulty identifying messages which encouraged and validated the expression of emotions. In other words,
these students may struggle to benefit from supportive messaging even if/when it is provided. In contrast, conversation orientation was associated with reappraisal, and subsequently, the ability to discriminate between more and less supportive communication. Both of these processes were hypothesized to be iterative. Students who suppress emotions may be unable to fully benefit from supportive messaging, contributing to unsuccessful coping and further suppression. Students who reappraise, however, will gravitate to those who can provide supportive messaging which further reinforces reappraisal.

Based on this review of the literature, hypotheses regarding the relationship between FCP and emotion regulation are presented below.

**Hypothesis 1**

Conversation orientation will be inversely related with suppression and positively related with reappraisal.

**Hypothesis 2**

Conformity orientation will be negatively related with reappraisal and positively related with suppression.

**Proposed Path Model**

Young adults who have learned from their family to suppress emotions may turn to other means of coping with unwanted emotions that do not require sharing their feelings with others. In research most germane to the objectives of this study, Shimkowski (2016) found that conformity orientation was directly related to suppression.
and drinking alcohol to cope. Additionally, suppression mediated the relationship between conformity orientation and drinking to cope. Existing research provides evidence of a link between FCP, emotion regulation strategies, and coping behaviors. It appears that emotion regulation strategies may also serve as a mediator between FCP and specific coping behaviors.

We propose that FCP predict emotion regulation strategies which in turn affect coping behaviors. The model illustrating these hypothesized pathways is depicted below.

**Figure 1**

*Hypothesized Path Model of Relationship Between FCP and Coping Behaviors, Mediated by Emotion Regulation*

*Note.* Direct effects of FCP on coping behaviors are not depicted.

This model may have implications for a number of coping behaviors outside the scope of this study. For example, suppression, predicted by FCP, may result in an increased prevalence of coping behaviors which are used to avoid or escape from reality, such as substance abuse and binging behaviors (Berking & Wupperman, 2012; Flayelle et
On the other hand, FCP that tend to lead to reappraisal can help facilitate a positive outlook in the face of adversity (Finkelstein-Fox et al., 2020), potentially mitigating the proclivity to cope through avoidant behaviors.

A review of extant literature on each coping behavior is presented hereafter. Hypotheses informed by this review — pertaining to each coping behavior in the context of the proposed path model — are also included.

**Drinking to Cope**

According to the 2019 National Survey on Drug Use and Health, nearly one-third of young adults ages 18 to 22 reported binge drinking in the previous month (National Institute on Alcohol Abuse and Alcoholism, 2022). Such heavy drinking can lead to impaired decision making and risky behaviors, memory loss and blackout, physical and/or sexual assault, poor self-care, and reduced self-esteem (Merrill & Carey, 2016). While there are many motives for drinking alcohol, drinking to cope with negative emotions appears to be especially problematic. Research has linked this palliative consumption to more hazardous drinking, and an increase in problems resulting from alcohol use such as negative physical, interpersonal, and emotional outcomes (Kenney et al., 2018; Veilleux et al., 2013). These effects have been observed longitudinally even at lower overall levels using alcohol to cope (Merrill et al., 2014).

FCP and emotion regulation tendencies likely play a key role in understanding who may be more susceptible to a tendency to drink alcohol to cope. Evidence suggests that open parent-child communication about alcohol, and specifically the potentially negative consequences of drinking, are related to less alcohol consumption (Miller-Day,
Inability to identify emotions and limited coping strategies, however, can lead to an over-reliance on alcohol as a means of alleviating negative affect (Merrill & Thomas, 2013; Veilleux et al., 2013). Consistent with the literature, we can expect that those from families high in conversation orientation have higher emotional intelligence, are less likely to suppress emotions, have a broader array of coping strategies, and are therefore less likely to drink alcohol to cope. In contrast, Shimkowski (2016) found that conformity orientation was both directly related with drinking to cope, and indirectly related through suppression.

This study seeks to add to the literature by replicating and expanding upon the results of Shimkowski (2016) whose sample consisted solely of college students. This is significant because young adults not attending college drink less frequently and in smaller amounts than their collegiate peers (Merrill & Carey, 2016). Drinking to cope may also be mediated by different variables in college versus non-college samples of young adults (Kenney et al., 2018). By including young adults who are not college students, this study will seek to determine if the findings of Shimkowsi (2016) are more broadly generalizable to young adults as a whole.

**Hypothesis 3**

Conversation orientation will be inversely related with drinking to cope, and this relationship will be mediated by emotion regulation (i.e., suppression and reappraisal).
Hypothesis 4

Conformity orientation will be positively related with drinking to cope, and this relationship will be mediated by emotion regulation.

Watching TV to Cope

 Watching TV is a prevalent method for regulating and eliciting a variety of emotions; people select content that helps them achieve a desired affective experience such as relaxation or excitement, and to cope with negative emotions (Schramm & Cohen, 2017). Illustratively, those who are feeling down on themselves may select media that portrays characters in worse situations than their own so that they feel better by comparison (Bartsch & Viehoff, 2010; Moskalenko & Heine, 2003). Escapism through TV watching is one form of coping that has received particular attention in the literature. In order to escape from everyday worries and responsibilities, people may use watching TV as a “thinking-pause button” (Henning & Vorderer, 2001, p.104), disengaging from their emotionally troubling reality.

Given that early FCP research focused on mass media consumption, exploring the relationship between FCP and watching TV to cope is apropos. For example, socio-orientation (the precursor to conformity orientation) was related to more frequent viewing of television generally, and more specifically, violent programming (McLeod et al.,1972) and escapist entertainment (Chaffee et al., 1971). Further efforts explained that not only did socio-oriented families tend to watch more TV, but they also used it as a topic of conversation, and as a resource for creating an “interdependent communicative environment” and “desired social reality” (Lull, 1980, pp. 331-332). More recently,
scholars have used adapted forms of the original FCP measure to explore how parents regulate the content — especially that of a sexual or violent nature — their children consume (e.g., Fujioka & Austin, 2002; Hust et al., 2011). The reconceptualization of FCP by Ritchie and Fitzpatrick (1990) pioneered a new vein of research which shifted away from a focus on mass media (Schrodt et al., 2008).

It is difficult to know what relevance early FCP research on TV watching has in a contemporary world dominated by video streaming. To this point, McLeod et al. (1972) asked participants how often they watched 13 popular TV series which were grouped into three categories by violence level. With thousands of titles now available to consumers at the tap of a finger, such methods are no longer feasible. Instead of watching regularly scheduled, live TV shows, most Americans prefer to stream content on-demand, and this is particularly true of young adults (Lebow, 2021; Rubenking & Bracken, 2021). While much of the context around media consumption has changed, TV remains a prevalent choice for emotion regulation. Seventy-three percent of American adults reported watching TV daily as a strategy to cope with the effects of the coronavirus pandemic (Pew Research Center, 2020). In other words, FCP scholarship could benefit from a revived investigation of TV watching (and mass media consumption more broadly), including their relationships with coping. Using the RFCP (instead of the original or adapted FCP measure) could provide additional insights, including determining if conversation and conformity orientation are associated with related variables as their antecedents were.
Recently, scholarship on watching TV and emotion regulation has added a focus on binge watching. Binge watching is inconsistently operationalized but can be understood as watching several TV series episodes back-to-back (Alimoradi et al., 2022). Multiple systematic reviews have concluded that binge watching may be normative and enjoyable, or problematic, resembling other maladaptive binging behaviors such as drinking and eating (Flayelle et al., 2019; Starosta & Izydorczyk, 2020). It appears that an escapist/coping motive is a strong predictor of problematic binge watching (Flayelle et al., 2022); this relationship has been found cross-culturally in a sample of over 12,000 participants and may be more common in women (Flayelle et al., 2020). However, it remains unclear how watching TV relates specifically to suppression and reappraisal. Flayelle et al. (2022) proposed that TV watching could facilitate reappraisal through exposure to differing perspectives. They similarly theorized that suppression would be related to watching TV as a means of coping with unwanted emotions. This study seeks to add to the literature by testing these theoretical assumptions. Due to the current ambiguity of these relationships, no explicit hypotheses concerning FCP or directionality are proposed; watching TV to cope was tested exploratorily in the path model as with the other coping behavior variables.

**Hypothesis 5**

Reappraisal and suppression will be positively associated with watching TV to cope.
Masturbating to Cope

Masturbation is extremely common. There is evidence to suggest the majority of American men and women masturbate monthly or more (Dodge et al., 2016; Rowland et al., 2020). In the National Survey of Sexual Health and Behavior, 94% of men and 85% of women aged 25 to 29 reported having masturbated in their lifetime (Herbenick et al., 2010). In addition to achieving sexual pleasure, preliminary evidence suggests that masturbation may be a common coping behavior. The results of Rowland et al. (2020) showed that 55% of women cited relieving stress as either the most important reason or a contributing reason for masturbating. In exploring related factors, Driemeyer et al. (2018), surveying a sample of European adults, found that depression, feelings of inadequacy, and sexual excitability were associated with masturbating to cope.

In spite of its ubiquity, masturbation, and masturbation to cope specifically, remains an understudied topic (Driemeyer et al., 2018). The research on masturbation is lacking in a number of areas, including examining the relationships between masturbation and family factors (Astle et al., 2020), and understanding the motives for masturbation and related variables (Rowland et al., 2020). This study seeks to diminish the paucity of research on masturbation by examining the relationship between FCP, emotion regulation, and masturbating to cope in young adults.

In a study that considered FCP as a state (not trait), discussions on sex-related issues were determined to have the lowest scores on conversation orientation among 10 topics, suggesting that few families discuss these matters openly (Baxter & Akkoor, 2011). Masturbation may remain taboo in most family communication. In a sample of
Canadian college students, only 11% reported having ever discussed masturbation with their parents (Klukas et al., 2021). The qualitative work of Kaestle and Allen (2011) found that this lack of conversation often contributes to initial uncertainty about the behavior. They concluded that most youths struggled to reconcile the physical pleasure experienced through masturbation with the shame they felt for participating in a taboo and/or stigmatized behavior. While most learned in late adolescence or young adulthood to reconceptualize masturbation as a normal or healthy practice, there were still some who reported remaining either opposed to masturbation or ambivalent. While masturbation may be understood as a low-risk or no-risk coping strategy (Driemeyer et al., 2018), it may be problematic for a subset of the population. For example, persistent feelings of guilt and shame associated with masturbation may be particularly severe in religious adolescents and young adults who are unsuccessful in attempts to abstain (Albobali & Madi, 2021; Malan & Bullough, 2005). It would seem that children in high conformity families that discourage or prohibit masturbation (e.g., religiously conservative) may experience distress at their inability to uphold family values. This guilt and shame is likely suppressed, not expressed, in a family low in conversation orientation. Instead, it is possible that the child may turn to the pleasure of masturbation to experience temporary relief from these unpleasant emotions. Similar patterns of coping have been found in viewing pornography, for example (Laier & Brand, 2017; Levin et al., 2019; Rousseau et al., 2021).
**Hypothesis 6**

Conversation orientation will be inversely related with masturbating to cope, and this relationship will be mediated by emotion regulation.

**Hypothesis 7**

Conformity orientation will be positively related with masturbating to cope, and this relationship will be mediated by emotion regulation.

**Eating to Cope**

Besides feeling hungry, coping is the most common answer provided as a motivation for eating (Jackson et al., 2003). While researchers have generally concluded that women use eating as a coping mechanism more frequently than men, findings are mixed as to whether gender is predictive of differential detrimental outcomes as a consequence of such eating (Stammers et al., 2020). Eating to cope with stress is associated with Binge Eating Disorder (Ferriter & Ray, 2011), obesity (Stammers et al., 2020), and longitudinally predicts an increase in weight and Body Mass Index (Boggiano et al., 2015).

Emotion regulation strategies appear to be closely tied with the decision to eat as a means of reducing negative affect. Those who binge eat to deal with stress tend to cope by avoiding their problems (Martyn-Nemeth et al., 2009), and have greater difficulty identifying and communicating their emotions (Ferriter & Ray, 2011). In a laboratory setting, participants higher in trait suppression, and those instructed to suppress their feelings after being exposed to stressors, ate more high calorie foods (Evers et al., 2010).
Similarly, Vohs and Heatherton (2000) found that students who were instructed to suppress their emotions after watching a sad video ate about 80 more grams of ice cream on average than those who were allowed to express their feelings freely.

Family communication also plays an important role in developing attitudes about health, food, and eating. For example, families higher in conversation orientation discuss health-related matters more often, and children from these families have healthier attitudes toward diet and exercise (Baiocchi-Wagner & Talley, 2013). Limited evidence shows that father’s conformity orientation may predict children’s disordered eating (Miller-Day & Marks, 2006), while father’s conversation orientation may mitigate these effects (Botta & Dumla, 2002). To date, no empirical efforts have specifically examined the relationship between FCP and eating to cope. Because eating to cope has been connected with suppression, we hypothesize the pathway presented for drinking to cope and masturbation to cope will also be evident for eating to cope.

**Hypothesis 8**

Conversation orientation will be inversely related with eating to cope, and this relationship will be mediated by emotion regulation.

**Hypothesis 9**

Conformity orientation will be positively related with eating to cope, and this relationship will be mediated by emotion regulation.
Exercising to Cope

Research detailing the health benefits of exercise is expansive and robust. Thus, it may be unsurprising that research which has examined motivations for exercise (including coping) has largely been focused on increasing physical activity, and understanding differences between those who exercise at higher and lower rates (Morris & Rowchudhury, 2020). For example, this line of research has found that exercising to improve one’s psychological condition is associated with more frequent physical activity (Abdullah et al., 2019; Molanorouzi et al., 2015).

More broadly, the extant literature, while not necessarily focusing on specific motivations for exercise (e.g., coping), is replete with findings that point toward physical activity being connected with positive health outcomes, including successful emotion regulation. Exercising can be viewed as a “win-win” because it improves both physical and psychological wellbeing (Mutrie & Faulkner, 2004, p. 23). Indeed, a number of randomized controlled trials involving various forms of physical activity as the treatment (jogging, dancing, resistance training, yoga, etc.) have consistently shown gains in physical fitness and mental/emotional health (e.g., less perceived stress) (Bernstein & McNally, 2017; Chovanec & Gröpel, 2020; Zhang et al., 2019). Habitual exercise is associated with resilience and the ability to regulate negative emotions, including the successful use of reappraisal (Giles et al., 2017; Li et al., 2021; Ligeza et al., 2019; Perchtold-Stefan et al., 2020). This may be because those who participate in regular physical activity tend to “focus on the bright side” (Cairney et al., 2014, p. 914). Additionally, exercise is an effective intervention for those struggling with emotion
regulation, enhancing their ability to cope with stress and negative emotions (Bernstein & McNally, 2017; Rostad & Long, 1996). Meta-analyses have concluded that exercise is also an effective treatment for depression and other related mental health issues (Schuch et al., 2016), and is comparable with therapy and antidepressant medication in its usefulness (Kvam et al., 2016). While abundant evidence indicates that exercise is largely a powerful and effective coping strategy, it is important to note that for a small percentage of the population, particularly those with an eating disorder, exercise can become a problematic and compulsive behavior (Goodwin et al., 2014).

As mentioned previously, Baiocchi-Wagner and Talley (2013) found that conversation orientation was associated with more frequent dialogue about health topics, and healthier attitudes toward diet and exercise. The research connecting FCP and exercise, however, is limited. Recently, scholars have questioned whether general measures of open family communication (e.g., conversation orientation) can predict typical health-specific behaviors without inquiring about conversations specific to health (Baiocchi-Wagner, 2015; Gafner, 2018). They also argue that the literature has excessively focused on attention-drawing outcomes, such as risky behaviors, instead of more mundane, but important health habits. To our knowledge, no research has specifically examined the relationship between FCP and exercising to cope. If a relationship is found between FCP and exercising to cope, this would provide evidence that general measures of family communication, such as the RFCP, may be useful for exploring specific, everyday health-related behaviors.
Because exercise and conversation orientation are associated with reappraisal, it is possible that a mediating pathway exists. For example, we could hypothesize that conversation orientation indirectly impacts exercising to cope through reappraisal; this hypothesis may be flawed, however. Although correlational research has linked exercise and reappraisal, the intervention literature cited above may suggest the more appropriate causal pathway is that exercising to cope predicts reappraisal. While no explicit hypotheses concerning FCP or directionality are proposed, exercising to cope was tested exploratorily in the same path model as the other coping behavior variables.

**Hypothesis 10**

Reappraisal and exercising to cope will be positively correlated.

**Current Study**

This study seeks to contribute to the literature by utilizing a national sample of young adults from first-marriage families to explore if emotion regulation strategies mediate the relationship between FCP and five common coping behaviors. These pathways will be tested in a single model. We expect that avoidant coping behaviors (drinking alcohol, eating, and masturbating) will follow a similar pathway, being positively predicted by conformity orientation and suppression, and negatively predicted by conversation orientation and reappraisal. Watching TV and exercising to cope will also be tested exploratorily in the model. This study will follow the recommendation of leading FCP scholars by using Horstman et al.’s (2018) updated conformity orientation scale. Additionally, young adults will be asked about FCP during adolescence to gauge if
retrospective perceptions of FCP during earlier years are related to outcomes into adulthood.
CHAPTER III

METHODS

This study used an online survey to obtain self-reported data about young adults’ (ages 18-30) retrospective perceptions of FCP during adolescence, and current reports of emotion regulation strategies and specific coping behaviors. In order to control for parental marital status, and because divorce affects FCP (Koerner & Fitzpatrick, 2006), all participants were from first-marriage families (i.e., households with two married parents who were not separated/divorced before the child reached age 18). Surveys were completed anonymously and no identifying data was collected. All study procedures were approved by the university’s Institutional Review Board.

Participants

Young adults, living in the United States, between the ages of 18 and 30 (N = 504), from first-marriage families, were recruited and compensated via a Qualtrics panel. Participants completed an online survey containing questions about demographics and study variables.

The median age of participants was 23 years old (SD = 3.62). The majority of participants were women (73.0%), while 24.4% were men, and 2.6% identified as non-binary, other, or chose not to report their gender. The majority of participants (61.9%) identified as single. Additionally, 19.2% reported living with a partner, 16.3% were married, 2.0% were divorced or separated, and 0.6% were widowed. Most of the participants (76.6%) did not have any children.
The sample was diverse in terms of education level. Nearly 40% of participants \((N = 195)\) had no college experience (i.e., high school diploma or less). Of those who had attended college, 27.2% did not have a degree, 26.4% had earned a bachelor’s degree, and 7.2% had earned a graduate degree. Participants also varied in terms of their economic status. Twenty-three percent of participants reported an annual income of less than $25,000, 32.1% reported earning between $25,000 and $50,000, 29.0% reported earning between $50,000 and $100,000, and 8.1% reported earnings in excess of $100,000 (7.7% chose not to report their income).

The majority of participants identified as White/Caucasian (75.4%). Of the remaining participants, 12.3% were Black/African American, 5.4% were of Middle Eastern or Asian descent, 4.8% were Latino, 0.8% were Pacific Islander, 0.2% identified as American Indian or Alaska Native, and 1.0% were mixed race or other. This racial distribution is reasonably consistent with data from the 2020 Census, with the possible exception of considerable underrepresentation of the Latino population (United States Census Bureau, n.d.).

**Measures**

Participant scores for study variables were determined by calculating the average score across all items of each respective scale after reverse-scoring any reverse-worded items.
Family Communication Patterns

**Conversation Orientation**

Participant perceptions of conversation orientation in their family communication during adolescence were measured using the conversation-orientation subscale of the revised Family Communication Patterns (RFCP) measure (Ritchie & Fitzpatrick, 1990). This subscale contains 15 items (e.g., “My parents encouraged me to express my feelings”), using a seven-point Likert scale from (1) strongly disagree to (7) strongly agree. Participants were instructed to answer questions about family communication that took place when they were between 12 and 17 years old. Cronbach’s alpha representing the internal consistency of this measure was .93.

**Conformity Orientation**

Participant perception of conformity orientation in their family communication during adolescence were measured using the Expanded Conformity Orientation Scale (ECOS). This scale was created by Horstman et al. (2018) to improve upon the original RCFP subscale by more accurately capturing the theoretically rich concept of conformity orientation. This scale is comprised of four subscales containing a total of 24 items measured on a seven-point Likert scale from (1) strongly disagree to (7) strongly agree. To measure retrospective reports, participants were prompted to reflect on family communication when they were between the ages of 12 and 17. The four subscales are respecting parental authority (e.g., “In our home, I was expected to speak respectfully to my parents”), experiencing parental control (e.g., “My parents felt it was important to be
the boss”), adopting parents’ values/beliefs (e.g., “My parents encouraged me to adopt their values”), and questioning parents’ beliefs/authority (e.g. “My parents encouraged open disagreement”); this subscale is reverse-coded. Alpha levels for the four subscales ranged from .76 to .85, with an overall alpha coefficient of .92.

**Emotion Regulation**

**Reappraisal**

Participants’ trait reappraisal was measured using the six-item reappraisal subscale of the Emotion Regulation Questionnaire (e.g., “When I want to feel less negative emotion, I change the way I’m thinking about the situation”) (Gross & John, 2003). Items were measured on a seven-point Likert scale from (1) strongly disagree to (7) strongly agree. Cronbach’s alpha for this scale was 0.85.

**Suppression**

Participants’ trait suppression was measured using the four-item (e.g., “I keep my emotions to myself”) suppression subscale of the Emotion Regulation Questionnaire (Gross & John, 2003). Items were measured on a seven-point Likert scale from (1) strongly disagree to (7) strongly agree. Cronbach’s alpha for this scale was .75.

**Coping Behaviors**

**Drinking to cope**

Drinking to cope was measured using the five-item coping motives subscale of the Drinking Motives Questionnaire (Cooper et al., 1992). Participants were invited to
answer how frequently their drinking is motivated by a particular reason (e.g., “To forget my worries”) on a four-point scale from (1) never/almost never to (4) almost always. Cronbach’s alpha for this scale was .88.

Watching TV to cope

Watching TV to cope was measured using the eight-item (e.g., “I watch TV series to get away from daily hassles”) coping/escapism subscale of the Watching TV Series Motives (Flayelle et al., 2019). Participants responded to statements about their TV watching habits on a four-point scale from (1) not at all to (4) to a great extent. Cronbach’s alpha for this scale was .90.

Masturbating to cope

The coping subscale from the Excessive Masturbation Scale (Driemeyer et al., 2018) measured masturbating to cope. This subscale includes ten items (e.g., “How often do you masturbate because you are stressed out?”) measured on a Likert-type scale from (1) never to (5) very often. Cronbach’s alpha for this scale was .94.

Eating to cope

The coping subscale from the Motivations to Eat measure (Jackson et al., 2003) measured eating to cope. This subscale contains five items (“How often do you eat as a way to comfort yourself?”) measured on a five-point Likert scale from (1) almost never/never to (5) almost always/always. Cronbach’s alpha for this scale was .89.
Exercising to cope

The psychological condition subscale from the Physical Activity and Leisure Motivation Scale (Zach et al., 2012) was used to measure exercising to cope. This subscale is comprised of five items (e.g., “I exercise because it takes my mind off other things”) rated on a five-point Likert scale from (1) strongly disagree to (5) strongly agree. Cronbach’s alpha for this scale was .91.

Data Analysis

All statistical analyses were conducted using software packages in R. Descriptive statistics for demographic and study variables were calculated (see Table 1), followed by bivariate correlations of study variables (see Table 2). Missing data was minimal; only seven participants had partially missing data. Participants who had missing data for a given scale were excluded in analyses in which that particular measure was included.

In order to test hypotheses related to the proposed path model (Figure 1), we conducted five path analyses using the lavaan package (Rosseel, 2012) in R. As suggested by MacKinnon et al. (2002), mediating effects were tested by calculating the cross products of the coefficients for FCP to emotion regulation, and the emotion regulation to coping behaviors path, controlling for direct effects. Estimates for indirect effects were calculated using bootstrapping ($k = 1000, 95\%$ CIs). Residual covariances were included in the model.
CHAPTER IV

RESULTS

Results from the statistical analyses are presented below. First, descriptive statistics and bivariate correlations are reported. Then, the results from a series of path models testing the hypothesized model with each of the five coping behaviors as the outcome variable (drinking, watching TV, masturbating, eating, and exercising) are presented.

**Descriptive Statistics**

Complete results of descriptive statistics for study variables are reported below in Table 1. Overall, participants reported that their family communication during adolescence had moderate levels of conversation orientation ($M = 4.13$) and conformity orientation ($M = 4.65$). Reported levels of trait reappraisal ($M = 4.49$) and suppression ($M = 4.10$) were also moderate. Regarding coping behaviors, average reported levels were above the midpoint of the respective scales for watching TV and exercising. Meanwhile, reported levels of drinking alcohol, masturbating, and eating were below the midpoint.
Bivariate Correlations

Pearson-correlation coefficients were calculated for all study variables (see Table 2). As expected, conversation orientation and conformity orientation were negatively correlated ($r = -.46, p < .001$). Interestingly, reappraisal and suppression were positively correlated ($r = .23, p < .001$). All five of the coping behaviors were positively correlated with one another. Suppression was positively correlated with each of the coping behaviors. Meanwhile, reappraisal was only correlated with exercising to cope ($r = .39, p < .001$).

Table 1

**Descriptive Statistics for FCP, Emotion Regulation, and Coping Behaviors**

<table>
<thead>
<tr>
<th>Variable</th>
<th>$n$</th>
<th>$M$</th>
<th>$SD$</th>
<th>Median</th>
<th>Range</th>
</tr>
</thead>
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<tr>
<td>Conversation Orientation</td>
<td>500</td>
<td>4.13</td>
<td>1.34</td>
<td>4.20</td>
<td>1.00–7.00</td>
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<tr>
<td>Conformity Orientation</td>
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<td>0.95</td>
<td>4.52</td>
<td>1.24–6.75</td>
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<td>4.49</td>
<td>1.13</td>
<td>4.50</td>
<td>1.00–7.00</td>
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<tr>
<td>Suppression</td>
<td>504</td>
<td>4.10</td>
<td>1.32</td>
<td>4.00</td>
<td>1.00–7.00</td>
</tr>
<tr>
<td>Drinking to Cope</td>
<td>504</td>
<td>1.69</td>
<td>0.74</td>
<td>1.40</td>
<td>1.00–4.00</td>
</tr>
<tr>
<td>Watching TV to Cope</td>
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<td>2.76</td>
<td>0.75</td>
<td>2.88</td>
<td>1.00–4.00</td>
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<td>Masturbating to Cope</td>
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<td>2.22</td>
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<td>2.10</td>
<td>1.00–5.00</td>
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<td>1.02</td>
<td>2.80</td>
<td>1.00–5.00</td>
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<td>Exercising to Cope</td>
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<td>3.30</td>
<td>1.00</td>
<td>3.40</td>
<td>1.00–5.00</td>
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</table>
Table 2

Bivariate Correlations for FCP, Emotion Regulation, and Coping Behaviors

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<th>Variable</th>
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<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
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<td>1. Conversation Orientation</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
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<td>2. Conformity Orientation</td>
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<td>—</td>
<td>—</td>
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<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>3. Reappraisal</td>
<td>.21***</td>
<td>.12**</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>4. Suppression</td>
<td>−.09*</td>
<td>.16***</td>
<td>.23***</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
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<td>—</td>
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<tr>
<td>5. Drinking to Cope</td>
<td>.07</td>
<td>−.06</td>
<td>−.04</td>
<td>.14**</td>
<td>—</td>
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<tr>
<td>6. Watching TV to Cope</td>
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<td>.15***</td>
<td>.07</td>
<td>.32***</td>
<td>.26***</td>
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<td>—</td>
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<td>7. Masturbating to Cope</td>
<td>.04</td>
<td>.06</td>
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<td>.23***</td>
<td>.42***</td>
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</tr>
<tr>
<td>8. Eating to Cope</td>
<td>.03</td>
<td>.10*</td>
<td>.02</td>
<td>.27***</td>
<td>.31***</td>
<td>.46***</td>
<td>.41***</td>
<td>—</td>
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<tr>
<td>9. Exercising to Cope</td>
<td>.10*</td>
<td>.10*</td>
<td>.39***</td>
<td>.19***</td>
<td>.13**</td>
<td>.16***</td>
<td>.18***</td>
<td>.11*</td>
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</tr>
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*p < .05 **p < .01 ***p < .001
Results of Path Analyses

Consistent with other studies (e.g., Shimkowski, 2016), bootstrapped confidence intervals that did not contain zero, rather than $p$-value cutoffs, were used to determine statistical significance.

Hypothesis 1

Hypothesis 1 was partially supported. We predicted that conversation orientation would be positively associated with reappraisal and negatively associated with suppression. As expected, conversation orientation was positively related with reappraisal, $\beta = .28, p < .001, 95\% \text{ CI} [.200, .358]$. However, contrary to predictions, conversation orientation was not significantly associated with suppression, although this relationship was in the expected direction, $\beta = -.02, p = .668, 95\% \text{ CI} [-.132, .085]$.

Hypothesis 2

Hypothesis 2 was partially supported. We predicted that conformity orientation would be positively associated with suppression and negatively associated with reappraisal. Conformity orientation was indeed positively related to suppression, $\beta = .21, p = .003, 95\% \text{ CI} [.061, .343]$, but, unexpectedly, was also positively related with reappraisal $\beta = .32, p < .001, 95\% \text{ CI} [.211, .440]$.

Hypothesis 3, Hypothesis 4, and Drinking to Cope in the Proposed Path Model

Hypothesis 3 was supported. We predicted that conversation orientation would be inversely related with drinking to cope, and that this relationship would be mediated by
emotion regulation. While conversation orientation did not have any direct effect on drinking to cope, $\beta = .05, p = .093, 95\% \text{ CI } [-.013, .101]$, it had a small, negative, indirect effect on drinking to cope through reappraisal, $\beta = -.02, p = .069, 95\% \text{ CI } [-.037, -.001]$.

Hypothesis 4 was partially supported. We predicted that conformity orientation would be positively related with drinking to cope, and that this relationship would be mediated by emotion regulation. Conformity orientation did not have a direct effect on drinking to cope, $\beta = -.03, p = .451, 95\% \text{ CI } [-.109, .047]$. Consistent with hypothesis 4, conformity orientation did have a small, positive, indirect effect on drinking to cope through suppression, $\beta = .02, p = .034, 95\% \text{ CI } [.004, .042]$. Contrary to predictions, conformity orientation had a small, negative, indirect effect on drinking to cope through reappraisal, $\beta = -.02, p = .077, 95\% \text{ CI } [-.044, -.001]$.

Overall, the model (see Figure 2) explained a little over 10% of the variance in reappraisal ($r^2 = .102$), a little over 2% of the variance in suppression ($r^2 = .026$), and close to 4% of the variance in drinking to cope ($r^2 = .037$).
Figure 2

*Drinking to Cope in the Proposed Path Model*

![Diagram of the proposed path model]

*Note.* Significant pathways are depicted with solid lines; non-significant paths are shown with dotted lines (*n* for path estimates = 498).

**Hypothesis 5 and Watching TV to Cope in the Proposed Path Model**

Watching TV to cope was tested exploratorily in the proposed path model; hypothesis 5 was partially supported. We predicted that both suppression and reappraisal would be positively associated with watching TV to cope. Indeed, watching TV to cope was positively predicted by suppression, $\beta = .18, p < .001, 95\% \text{ CI } [.128, .228]$. Reappraisal, however, did not significantly predict watching TV to cope, $\beta = -.02, p = .606, 95\% \text{ CI } [-.085, .052]$.

Conformity orientation had a direct, positive effect on watching TV to cope, $\beta = .10, p = .017, 95\% \text{ CI } [.015, .185]$. In addition to this direct effect, suppression significantly mediated the relationship between conformity orientation and watching TV to cope, $\beta = .04, p = .008, 95\% \text{ CI } [.010, .065]$. Conversation orientation did not have a
direct effect, $\beta = .03$, $p = .338$, 95% CI $[-.029, .088]$, nor indirect effect on watching TV to cope.

The model (see Figure 3) explained almost 12% of the variance in watching TV to cope ($r^2 = .118$).

**Figure 3**

*Watching TV to Cope in the Proposed Path Model*

Note. Significant pathways are depicted with solid lines; non-significant paths are shown with dotted lines ($n = 497$).

**Hypothesis 6, Hypothesis 7, and Masturbating to Cope in the Proposed Path Model**

Hypothesis 6 was not supported. We predicted that conversation orientation would be inversely related with masturbating to cope, and that this relationship would be mediated by emotion regulation. In the path model, conversation orientation had neither direct effects, $\beta = .08$, $p = .073$, 95% CI $[-.009, .164]$, nor indirect effects on masturbating to cope.
Hypothesis 7 was supported. We predicted that conformity orientation would be positively related with masturbating to cope, and that this relationship would be mediated by emotion regulation. Indeed, conformity orientation had an indirect effect on masturbating to cope through suppression, $\beta = .04, p = .021, 95\% \text{ CI } [.010, .070]$. No direct effects of conformity orientation were observed in the model, $\beta = .08, p = .173, 95\% \text{ CI } [-.028, .189]$.

The model (see Figure 4) explained nearly 6% of the variance in masturbating to cope ($r^2 = .058$).

**Figure 4**

*Masturbating to Cope in the Proposed Path Model*

![Figure 4 diagram](image)

*Note.* Significant pathways are depicted with solid lines; non-significant paths are shown with dotted lines ($n = 497$).

**Hypothesis 8, Hypothesis 9, and Eating to Cope in the Proposed Path Model**

Hypothesis 8 was not supported. We predicted that conversation orientation would be inversely related with eating to cope, and that this relationship would be mediated by emotion regulation. Unexpectedly, however, conversation orientation had a direct and
positive effect on eating to cope, $\beta = .10, p = .017$, 95% CI [.019, .181], and this effect was not mediated by emotion regulation.

Hypothesis 9 was supported. We predicted that conformity orientation would be negatively related with eating to cope, and that this relationship would be mediated by emotion regulation. In accordance with this hypothesis, conformity orientation had both a direct effect, $\beta = .14, p = .026$, 95% CI [.019, .252], and indirect effect on eating to cope, mediated by suppression, $\beta = .05, p = .012$, 95% CI [.013, .088].

Paths negatively predicting eating to cope from both conversation orientation, $\beta = -.02, p = .074$, 95% CI [−.051, .001], and conformity orientation, $\beta = -.03, p = .098$, 95% CI [−.068, .001], through reappraisal, were not significant.

The model (see Figure 5) explained over 9% of the variance in eating to cope ($r^2 = .095$).
**Hypothesis 10 and Exercising to Cope in the Proposed Path Model**

Hypothesis 10 was supported. As predicted, reappraisal was positively correlated with exercising to cope ($r = .39, p < .001$).

Exercising to cope was tested exploratorily as an outcome in the path model. Both conversation orientation, $\beta = .08, p < .001, 95\% \text{ CI [.055, .117]}$, and conformity orientation, $\beta = .10, p < .001, 95\% \text{ CI [.056, .143]}$ had an indirect effect on exercising to cope through reappraisal.

The model (see Figure 6) explained a little over 16% of the variance in exercising to cope ($r^2 = .162$).
Figure 6

Exercising to Cope in the Proposed Path Model

Note. Significant pathways are depicted with solid lines; non-significant paths are shown with dotted lines \( (n = 497) \).
Relying on Family Communication Patterns Theory (Koerner & Fitzpatrick, 2002a), we can expect that familial interactions create a shared communicative environment, including beliefs surrounding emotions, and common expectations (tacit or explicit) for their expression. Families high in conversation orientation, for example, speak frequently and openly about a wide variety of topics, including their feelings. Previous research has shown that FCP impact the strategies people select when regulating their emotions (Weinzapfel & Schrodt, 2022). For instance, those from families high in conformity orientation may be more likely to disguise their genuine feelings in order to display emotions that are more aligned with what they believe their parents desire (Schrodt, 2020). Shimkowski (2016) found that this suppression of emotions mediated the relationship between young adults’ reports of conformity orientation and their proclivity to consume alcohol as a coping mechanism.

The purpose of this study was to expand the literature by further exploring if emotion regulation strategies, namely reappraisal and suppression, mediated the relationship between FCP and five common coping behaviors (drinking alcohol, watching TV, masturbating, eating, and exercising) among American young adults from first-marriage families. Furthermore, recognizing that parent-child communication normatively evolves with the transition into adulthood (Aquilino, 1997), we sought to
determine whether young adults’ retrospective perceptions of FCP during adolescence were related to current reports of emotion regulation and coping behaviors. In another important contribution to extant research, this study followed the recommendations of FCP scholars (Horstman et al., 2018) by using an improved scale for measuring conformity orientation, and increasing generalizability by including participants with varying levels of education — not just college students as is common in FCP research (Koerner & Fitzpatrick, 2014).

**FCP and Emotion Regulation**

The results of the path analyses supported the prediction that conversation orientation would be positively associated with reappraisal. It is possible that individuals from families high in conversation orientation are exposed to a variety of viewpoints which enables them to reappraise by considering multiple possible interpretations for their circumstances. We also hypothesized that conversation orientation would negatively predict suppression. While we found a negative correlation, the relationship between conversation orientation and suppression was not significant in the path analyses. All of these results align with the findings of Jones et al. (2017) who tested a similar mediational model.

The prediction that conformity orientation would be positively associated with suppression was supported. This finding bolsters the existing literature which has also found evidence for this relationship (Jones et al., 2017; Schrodt, 2020; Shimkowski, 2016). It is likely that people from families high in conformity orientation learn to
suppress emotions which they believe to be inconsistent with perceived social expectations. Unexpectedly, we also found a positive and moderately strong relationship between conformity orientation and reappraisal above and beyond the association between conversation orientation and reappraisal. This appears to be a novel finding; the only other study to directly address the relationship between these variables (to our knowledge) found no significant association (Jones et al., 2017). Such a result could be understood as counterintuitive because conformity orientation implies homogeneity in beliefs and values (Koerner & Fitzpatrick, 2002a). However, a study which evaluated the relationship between reappraisal and suppression across 23 countries argued that cultures which promote relational harmony can be high in both reappraisal and suppression (Matsumoto et al., 2008). This is because individuals might first suppress potentially disruptive emotions until they can reappraise to “select the ’proper’ emotion to express (or simulate) in order to preserve social order” (p. 933). Given this perspective, and recognizing that FCPT proposes that conformity orientation is accompanied by an aversion to conflict (Koerner & Fitzpatrick, 2002a), we might expect conformity orientation to be positively related to both suppression and reappraisal. It is worth noting that reappraisal and suppression were positively correlated within our sample. Some studies have also found these variables to be positively correlated in U.S. samples (e.g., Ellis et al., 2019; Matsumoto et al., 2008), while others have indicated no significant relationship (e.g., Gross & John, 2003; Jones et al., 2017). Future research should seek to clarify the relationship between conformity orientation and reappraisal and how this
might differ depending on cultural values. It is also possible that this result could be
unique to this sample or explained by the retrospective nature of FCP reports.

**Direct Effects of FCP on Coping Behaviors**

Shimkowski (2016) found that conformity orientation had a small, direct effect on
drinking to cope. This finding was not replicated in our study. However, FCP exhibited
direct effects on two coping behaviors: watching TV and eating. Conformity orientation
had a direct and positive effect on watching TV to cope. Interestingly, this finding is
concordant with early FCP research which found that socio-orientation (the theoretical
antecedent of conformity orientation) was connected with more time spent watching
television (McLeod et al., 1972), and selecting entertaining shows (which might be more
conducive to “escape”) over informative news programming (Chaffee et al., 1971, p.
338). It is possible that similar trends have persisted into today’s streaming-dominated
milieu, but further research should confirm this finding.

We also found that both conversation orientation and conformity orientation had
direct and positive effects on eating to cope. The reasons for these relationships remain
unclear. It is possible that these associations are incidental or explained by another
variable. It is also possible that these relationships, including the tendency of eating to
cope to become problematic, may be impacted by the interaction of conversation
orientation and conformity orientation, and/or differ across demographic groups.
Indirect Effects of FCP on Coping Behaviors Through Emotion Regulation

One of this study’s primary goals was to explore the potential for emotion regulation strategies to serve as mediators between FCP and specific coping behaviors. Perhaps the most salient pattern in our path analyses was the indirect effects of conformity orientation on coping behaviors through suppression. This path had a positive association with four out of the five coping behaviors: drinking, watching TV, masturbating, and eating. This evidence suggests that young adults from families high in conformity orientation are more likely to suppress their emotions, and subsequently cope in ways that may be understood as avoidant. These findings build on the work of Shimkowsi (2016) who found that suppression mediated the relationship between drinking to cope and conformity orientation, and highlight that this pattern likely extends to behaviors beyond drinking alcohol. Although such behaviors may not always be harmful, coping motivated by a desire to avoid or escape reality has been linked with negative outcomes, including these coping behaviors becoming problematic or excessive (Flayelle et al., 2022; Kenney et al., 2018). Notably, exercise — the only coping behavior measured which has been consistently linked with positive outcomes (Kvam et al., 2016) — did not follow this pattern.

We also hypothesized that reappraisal would act as a mediator between FCP and coping behaviors. Indirect effects of FCP on coping behaviors through reappraisal were found in two of the five coping behaviors: drinking and exercising. As predicted, reappraisal was negatively related with drinking to cope and positively associated with exercising to cope. Additionally, a positive relationship between conversation orientation
and reappraisal reflected our hypotheses. However, contrary to our expectations, and in a novel contribution to the literature, conformity orientation also had a positive association with reappraisal. Having been linked to positive mental health outcomes in numerous studies, reappraisal is generally considered a beneficial coping strategy (Brewer et al., 2016; Gross et al., 2015). Given preliminary evidence that conformity orientation may be positively related with both suppression and reappraisal, and understanding that these emotion regulation strategies can lead to more or less successful coping behaviors, future research should seek to disentangle the associations between these variables. It is possible that other factors such as cultural values, socioeconomic status, religiosity, and conversation orientation may moderate the relationships between conformity orientation and emotion regulation strategies. Such research could help inform parents and practitioners who wish to find buffers to protect against the tendency of conformity orientation to promote emotion suppression.

**Limitations**

There are a number of important limitations to consider when interpreting the results of this study. Although the sample was reasonably diverse in terms of education level, income, and race, it included primarily women (73%), limiting the generalizability of findings. Likewise, although all participants were from first-marriage families, allowing us to control for parental marital status, these results may not be applicable to young adults who experience parental divorce or are raised in single-parent households.
As participant scores were based on self-report, they may be susceptible to social desirability bias. This could be particularly true of the coping behaviors which are sexual in nature (e.g., masturbation) and/or might be considered taboo (Krumpal, 2013).

While this study made a significant contribution by examining path models connecting FCP, emotion regulation, and coping behaviors, it did not include any moderating or control variables, and effect sizes were relatively small. Future research should explore how these relationships are affected by demographic and other potentially moderating variables. In particular, it is important for future scholars to consider communication orientation and conformity orientation in tandem given FCPT’s underlying typology and the frequent interaction of these two constructs (Koerner & Fitzpatrick, 2014).

This study is also limited by its cross-sectional nature. Although our hypotheses are based on theory and prior research, and included retrospective reports of FCP, we cannot claim directionality or causation. Illustratively, as noted previously, it may be possible that exercising to cope predicts reappraisal, instead of the inverse. Future longitudinal research would be necessary to make more confident causal assertions. Although reports of FCP were retrospective, these may have been affected by recall bias.

**Conclusion**

The purpose of this study was to expand extant literature by testing if emotion regulation strategies served as a mediator between FCP and five coping behaviors (drinking alcohol, watching TV, masturbating, eating, and exercising) among young
adults from first-marriage families. The most prominent pattern found in these analyses was that conformity orientation was indirectly and positively associated through suppression with coping behaviors that may be considered avoidant: drinking alcohol, watching TV, masturbating, and eating. Reappraisal, meanwhile, was negatively related to drinking to cope and positively linked with exercising to cope. As expected, conversation orientation predicted reappraisal. In a novel finding, conformity orientation was also found to be positively associated with reappraisal. Future research should identify variables which moderate the relationships between FCP and emotion regulation. These results have implications for parents and practitioners who wish to aid teens develop into emotionally resilient young adults. For example, families high in conformity orientation should be particularly mindful of ensuring that their children are comfortable expressing their feelings.

In addition to extending existing knowledge about the interplay between FCP, emotion regulation, and coping behaviors, this study also made meaningful contributions to the literature by surveying a sample that was not exclusively college students, adding to a growing body of work using improved operationalization for conformity orientation, and providing evidence that retrospective perceptions of FCP during adolescence are related to behavioral outcomes in young adulthood.
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