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Beliefs About Emotions, Sociotropy – Autonomy and Attitudes
Toward Psychotherapy

Duygularla İlgili İnançlar, Sosyotropi – Otonomi ve
Psikoterapiye Yönelik Tutumlar

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Abstract

This study examined the relationship between emotional factors and attitudes towards utilizing psychotherapy services. In particular, the effect of the beliefs towards expressing and experiencing anger and sadness on the attitudes toward psychotherapy were investigated. Additionally, the effect of personal orientations of sociotropy and autonomy in relation to how one perceives the risk of expressing negative emotions were examined. It was expected that people with stronger sociotropic orientation would emphasize the relational aspect- i.e. expressing negative emotions would harm relationships. People with stronger autonomy orientation were expected to emphasize the personal aspect- that expressing negative emotions could make them feel weak. A new questionnaire was developed in order to measure the beliefs about the harm and benefit of experiencing and expressing two emotions: Sadness and anger. The Beliefs About Harm and Benefit of Expressing Emotions, the Personal Style Inventory and the Thoughts About Psychotherapy Survey were used in the study. The results of regression analysis demonstrated that the beliefs about the harm of expressing both sadness and anger positively correlated with the negative attitudes toward psychotherapy, whereas, the beliefs about the benefit of sadness was negatively correlated with people's negative attitudes toward psychotherapy. Consistent with the literature, women had more positive attitudes towards utilizing psychotherapy services apart from the effect of emotional beliefs. Finally, sociotropic and autonomous personal styles did not predict the beliefs about the harm of emotions in personal and relational domains. This study adds to the help-seeking literature by elaborating the emotional reasons behind people's underutilization of psychotherapy services in Turkey. Implications of the results for improving the utilization of psychological counselling were discussed.

Keywords: beliefs about emotions, sadness expression, anger expression, sociotropy, autonomy, attitudes toward psychotherapy

Özet

Bu çalışmada, duygularla ilgili inançlar ve psikoterapiden yararlanmaya yönelik tutumlar arasındaki ilişki incelenmiştir. Özellikle, öfke ve üzüntü duygularını deneyimleme ve ifade etmeye yönelik inançların psikoterapiye yönelik tutumlar üzerindeki etkisi araştırılmıştır. Ek olarak, sosyotropi ve otonomi yönelimlerinin insanların olumsuz duyguları ifade etmenin risklerine dair algılarını nasıl etkilediği incelenmiştir. Daha güçlü sosyotropik yönelime sahip insanların, duyguları ifade etmenin ilişkilere zarar verebileceği gibi daha ilişkiyel inançları vurgulayacakları düşünülmüştür. Daha güçlü otonomik yönelime sahip olanların ise, duyguları ifade etmenin onları zayıf gösterebileceği gibi, daha bireysel düzeyde inançları vurgulamaları beklenmiştir. Çalışma kapsamında, öfke ve üzüntü duygularını deneyimleme ve ifade etmenin zarar ve yararlarıyla ilgili inançları ölçmek için yeni bir anket geliştirilmiştir. Araştırmada, Duyguları İfade Etmenin Zararlarına ve Yararlarına Yönelik İnançlar Ölçeği, Kişisel Tarz Envanteri ve Psikoterapi Hakkındaki Düşünceler Ölçeği kullanılmıştır. Regresyon analizi sonuçları, öfke ve üzüntüyü ifade etmenin zararlarına yönelik inançların, psikoterapiye yönelik olumsuz tutumlar ile pozitif yönde ilişkili olduğunu göstermiştir. Ayrıca insanların üzüntüyü ifade etmenin yararları hakkındaki inançları ile psikoterapiye yönelik olumsuz tutumlarının negatif yönde ilişkili olduğu bulunmuştur. Literatür ile tutarlı olarak, kadınların, duygularla ilgili inançların etkisinden bağımsız olarak, psikoterapi hizmetlerinden yararlanma konusunda daha olumlu tutumlara sahip oldukları bulunmuştur. Son olarak, sosyotropi ve otonomi kişisel tarzlarının, duyguların kişisel ve ilişkiyel alanlardaki zararlarına dair inançları beklendiği gibi öngörmediği görülmüştür. Bu çalışma, Türkiye'de insanların psikoterapi hizmetlerinden yeteri kadar yararlanmalarının ardındaki duygusal nedenleri detaylandırarak psikolojik yardım arama literatürüne katkıda bulunmuştur. Elde edilen bulgular, insanların psikolojik danışmanlıktan yararlanma oranlarını iyileştirmek açısından tartışılmıştır.

Anahtar kelimeler: duygularla ilgili inançlar, öfkeyi ifade etme, üzüntüyü ifade etme, sosyotropi, otonomi, psikoterapiye yönelik tutumlar

INTRODUCTION

Psychological help sources provide a professional understanding and a variety of solutions to people's problems. But recent research has shown that people seek help from close friends and family members first and go to professional counsellors as a last choice (Vogel & Wester, 2003). It has been found that a majority of Turkish people do not seek professional psychological help in order to resolve their problems. These findings are very important especially because of the high prevalence of psychological problems among Turkish young people (Çuhadaroğlu & Yazici, 1998; Güneri, Aydın & Skovholt, 2003).

Emotional expression has been found to be one of the most important factors that lead people to avoid seeking psychological help. People's comfort with expressing emotions positively affect the decision to seek psychological help, whereas, people's negative beliefs about both experiencing and expressing emotions are found to be significant barriers to seeking counselling (Komiya, Good & Sherrod, 2000; Vogel & Wester, 2003). Several studies also found that, an important number of psychotherapy clients keep secrets from their therapists because of their fear of expressing strong emotions that are loaded in their secrets (Hill, Thompson, Cogar, & Denman, 1993).

Culture is also an important domain of interest for a broad understanding of emotional expression as it has been shown to influence both emotional experience and expression of individuals. Culture has a complex effect on social life of people, creating social norms, values and multiple roles that individuals are expected to fulfil. Values and norms shape human psyche and behavior. Thus, emotional experience of people is not universal, cultural differences in emotional norms determine how people experience, regulate and express their emotions. Every aspect of emotions is known to be effected by different social contexts. That makes the nature of human self highly affected by cultural phenomena. The theory of Markus and Kitayama (1991) explain the interaction of culture and human self in detail. Their cross-cultural research suggests that those cultures that value

independency (e.g. North American and European culture) tend to value emotional expression, whereas, cultures that can be characterized as interdependent (e.g. Chinese culture) tend to value emotional control, mostly in order to protect interpersonal harmony. At the personal level several authors defined ‘independent and interdependent self-construal’ concepts to describe how individuals construe the relationship between their sense of self and others. Independent self-construal provides the prioritization of internal motives, traits and values, thus the behaviors are mostly shaped with these internal attributes. On the other hand, interdependent self prioritizes being connected with others, thus the feelings, thoughts, and actions of others have huge impact on one’s sense of self (Markus & Kitayama, 1991).

In terms of psychological help-seeking, several studies showed that having a more interdependent self-construal predicted more positive help-seeking attitudes, whereas, independent self-construal was associated with negative attitudes toward seeking psychological help (Tata & Leong, 1994; Yeh, 2002). According to these results, the authors suggested that interdependent self may be providing a more positive orientation towards one’s social network. This orientation provides a more positive attitude toward making acquaintances and seeking support from others. Thus, it may also ensure a more positive attitude toward seeking help from mental health professionals and being more open with them. On the other hand, some other authors suggested that people with high level of interpersonal relatedness also may avoid counseling because of their negative perceptions about the consequences of emotional expression (Shea & Yeh, 2008; Yeh & Wang, 1970).

Recently, scholars have examined culture as a moderating factor between emotional restraint and different social goals. Wei, Carrera, Lin and Yi (2013) indicated that individuals in interdependent cultures tend to value emotional suppression in order to preserve interpersonal harmony, whereas, this purpose was not found to be significant for more independent cultures. Moreover, Butler, Lee and Gross (2007) proposed that suppression was associated with self-protective

social goals for Americans, holding Western values, whereas, it was not significant as far as people holding Asian values concerned.

The literature suggests that cultural values affect interpersonal relationships and determine emotional tendencies of people. Self and other-focused reasons, have empirical support as two main social determinants of emotional suppression. Furthermore, sociotropy and autonomy were proposed (Clark & Beck, 1991) as similar concepts of the self. Those are conceptualized as two convergent cognitive styles related to an individual's main motivations in life. A sociotropic style includes a strong motivation in providing and maintaining positive interactions with other people. An autonomous cognitive style, on the other hand, is formed by the motivation of seeking for independency and freedom instead of prioritizing relational solidarity. According to cognitive psychology, emotions are seen as intertwined with one's other cognitive aspects like thoughts, behaviors and motivation. Yet, there is not much research findings that compose a link between sociotropy/autonomy and emotional factors.

The relationship between emotional and interpersonal factors have mostly been examined by cross-cultural studies, via the concept of self-construal. On the other hand, countries like Turkey includes an interaction of both Western and non-Western values. For further understanding of this idea, Kagitcibasi (2005) proposed two dimensions of the self-construal: interpersonal distance and agency. According to this conceptualization, interpersonal distance reflects the degree of relatedness, whereas, interpersonal agency reflects the degree of autonomy. In addition, autonomy and relatedness underlie people's relationships with others and social behaviors. In terms of self-construal, autonomy and relatedness have been conceptualized as two different aspects of the cultural construal of self, and these aspects exist together in self-conceptions of Turkish young people (İmamoğlu, 1998; İmamoğlu & Karakitapoğlu-Aygün, 2007).

In Turkey, young people (15-24 ages) are known to constitute 30 percent of population approximately, and an increase of the severity of psychological problems is inevitable if they do not get enough help (Koydemir-Ozden, 2010).

However, there is a lack of research that examined the interpersonal and emotional factors that affect help-seeking attitudes of Turkish people. The main purpose of this study is to examine the relationship between beliefs about experiencing and expressing two emotions, anger and sadness, and psychological help-seeking attitudes of Turkish young people. In terms of psychological help seeking, the main concern of this study is Turkish people's attitudes toward psychotherapy.

Any kind of psychotherapy is known to be a unique process in which difficult experiences may arise, and the client is to work through them with the help of the psychotherapist. Experiencing and expressing strong emotions is known to be one of the most challenging factors for an individual in a psychotherapy process. This study is concerned with an elaborate understanding of the relationship between the beliefs about emotions and attitudes toward psychotherapy. Personal styles, *sociotropy* and *autonomy*, that are expected to be intertwined with one's emotional experience were proposed as factors related to one's beliefs about emotional experience and expression. The chief goal of this study is to understand the effects of an individuals' beliefs about anger and sadness on their attitudes toward psychotherapy. Another purpose of the study is to understand if sociotropy and autonomy have an impact on the beliefs about emotions and attitudes toward psychotherapy. Sociotropy is expected to be related to the beliefs about the relational harm of experiencing and expressing emotions. On the other hand, autonomy is expected to be in correlation with the beliefs about personal harm of emotions.

Main questions of this study are: 'Are the beliefs about experiencing and expressing emotions significant factors related to people's negative attitudes towards psychotherapy?', and 'Do the personal styles, sociotropy and autonomy have an effect on the beliefs about emotions and attitudes toward psychotherapy?'

1.1 LITERATURE REVIEW

In this section, the factors that affect people's attitudes towards seeking psychological help are discussed in detail. The most studied factors in help-seeking literature are explained and the role of emotions in help-seeking process is elaborated. Furthermore, cultural and interpersonal factors are discussed in relation to emotional expression and help-seeking. Finally, personal styles, sociotropy/autonomy are explained, emphasizing their link to help-seeking process.

1.1.1 Young People's Attitudes Toward Seeking Psychological Help

“Help seeking” is the process of acknowledging psychological problems and taking certain steps towards receiving support for them. It is formally described as a process that includes any communication aimed at obtaining support, advice or assistance of others in order to deal with the current stressors (Hinson & Swanson, 1993). Seeking help for a mental health problem is a process that someone receive the help from a professional source. Psychological help sources provide a professional understanding and a variety of solutions to mental health problems, regardless the severity of the problems. Nonetheless, recent research has shown mental health professionals are usually the last help sources that people usually tend to use.

Young ages are known as the critical times that many psychological problems emerge. University students suffer from several psychological stressors and also more severe mental health problems. According to developmental theories (Erikson, 1968), the transitional period from adolescence to adulthood includes very specific difficulties, especially because of the certain age-appropriate tasks that are needed to be achieved. The main developmental tasks are gaining an identity, deciding about a career, gaining an adequate capacity to be independent, and finally being ready for a different kind of intimacy that comes along with an adult life, especially with marriage and family life. The process of achieving these tasks usually involve a significant amount of psychological distress. Young

person's inability to cope with distress may jeopardize the psychological health in his/her adult life and may even cause severe psychopathologies (Dubow, Lovko & Kausch, 1990). Seeking help for mental health is seen as a reaction to psychological distress. It is proposed to be an effective coping strategy that provides well-being (Schonert-Reichl, 1996; Wilson & Diane, 2010). Also, receiving help for psychological problems is crucial in order to prevent the more negative outcomes in the future (Rickwood, Deane, & Wilson, 2007).

1.1.2 Help-seeking Prevalence of Turkish Young People

In Turkey, the willingness of seeking help for psychological problems was reported to be very low by many studies. Erkan, Özbay, Cihangir-Çankaya and Terzi (2012) examined the relationship between university students' problems, problem levels, sources of help and their willingness to seek professional help. For this purpose, a total of 5829 students from 10 different universities participated to the study. The majority of the students reported that even if they suffered from psychological problems, they preferred to seek help from their families and friends instead of mental health professionals. The participants' willingness to seek help from mental health field was only at a moderate level. As far as their socio-economic status and problem areas were concerned, results indicated that the students from higher SES had more psychological problems than the students from lower socio-economic status. In general, economic, emotional and academic problems had the majority among the all problem areas reported by the students.

Koydemir and Demir (2005) examined the prevalence of help-seeking behavior of university students aiming to determine the type of sources that they tend to use for different type of psychological problems. The results showed that participants were willing to seek help from different help sources for different psychological problems, expectedly. 133 undergraduate students reported that they were most likely to seek help from a friend for their personal problems or they simply tried to solve these kinds of problems by themselves. However, they preferred to see a counselor for other problem areas they perceive to be more

difficult, such as pessimism and shyness. Similarly, for social, academic, sexual, and family problems they preferred to seek help from other sources except from counselors. Thus the total prevalence of seeking help from a counselor was found to be respectively low for almost every problem area the students reported.

Moreover, Topkaya and Meydan (2013) also examined the 459 university student's intentions to seek psychological help and the sources of help they preferred. Their families and friends constituted the main help sources the students preferred. The participants' intentions to seek help from a mental health professional was again found relatively low. Having emotional problems were reported to provide the higher level of motivation to seek help from a counsellor. Having problems related to one's personality and having familial problems were reported as other common reasons to seek psychological help. Academic problems, friendship problems, adaptation issues, substance abuse, romantic and sexual problems, and economic problems followed respectively as other motives to seek help from mental health field. Understanding the major problem areas of the students and the effect of gender on the problem areas and help seeking intentions were other purposes of this study. The results showed that gender difference was significant in terms of several problem areas such as emotional, familial and personality problems.

The results of recent studies have shown that mental health services are underutilized by a majority of Turkish young adults. Despite the fact they reported to have plenty of psychological problems that effect essential areas of their lives such as emotional, academic, interpersonal and family life (Çuhadaroğlu & Yazıcı, 1999; Güneri, Aydın & Skovholt, 2003; Topkaya & Meydan, 2013), they do not seem to discern professional help sources as valid methods for solving their problems (Koydemir & Demir, 2005). A relatively small number of students had sought help from professionals in the case of acknowledging a psychological problem, while many students reported that they were not aware of the mental health services offered in university campuses (Koydemir-Özden, 2010). On the other hand, Türküm, Kızıltaş and Sarıyer (2016) investigated students' expectations

from mental health professionals at the counselling service of university. They reported that many of the participants have realistic expectations, nevertheless, the counsellors were again the least preferred helping sources compared to the family and close friends. Common expectations of the majority of the participants were about the secrecy of their personal information, being listened carefully and understood well by the counsellor, being led about their important life decisions, and developing a sincere relationship with the counselor.

1.1.3 Leading Factors That Affect Help-seeking Behavior

Researchers have been very interested in the help-seeking process, especially the reasons of people's unwillingness about applying to mental health professionals for their problems. For the purpose of understanding and improving the utilization of mental health services, scholars have examined many factors that are conceptualized as important reasons for people's reluctance to seek professional psychological help. The studies conducted for understanding the important factors behind the help-seeking process determined the attitudes of people as one of the most effective factors. According to Fisher and Turner (1970), one's perception about the outcomes of seeking help as negative or positive constitutes the attitude toward seeking psychological help. The results of many studies in this field showed that one's attitude toward the idea of seeking psychological help is one of the foremost predictors of actually applying to a professional for treatment (Vogel & Wester, 2003). There is empirical support that the underutilization of mental health services depends largely on the individuals' negative attitudes toward seeking help (Cepeda-Benito & Short, 1998; Deane & Todd, 1996; Kelly & Achter, 1995; Topkaya, 2014). The literature has shown that people's negative attitudes towards seeking psychological help predicted their current intentions to utilize the services available. For instance, Cepeda-Benito and Short (1998) investigated the relationship between self-concealment, attitudes toward psychotherapy and intentions to seek psychological help. The results indicated that more positive attitudes predicted greater intentions of help-seeking for whatever reasons.

Studies have focused on individual level and demographic factors in relation to help-seeking process. For instance, low interpersonal dependency (Bornstein, Manning, Krukonis, Rossner & Mastrosimone, 1993), negative attitudes toward self-disclosure (Hinson & Swanson, 1993), anticipating negative treatment outcomes (Vogel, Wester, Wei & Boysen, 2005), treatment fearfulness, perceived social and self-stigma (Topkaya, 2014), the tendency to conceal important personal information (Kelly & Achter, 1995), restrictedness of emotional expression (Vogel, Wade & Hackler, 2008) and discomfort with emotions (Komiya, Good & Sherrod, 2000) were among the individual level factors that were reported as predictive factors of negative attitudes towards utilizing psychotherapy and unwillingness to seek psychological help. On the other hand, perceiving more social support (Cepeda-Benito & Short, 1998), anticipated utilities of self-disclosure (Vogel, Wester, Wei & Boysen, 2005) and higher levels of psychological distress (Vogel & Wei, 2005) were other individual level factors that were reported to be in a reverse relationship with negative attitudes towards psychotherapy and unwillingness to seek psychological help.

Gender and gender roles (Fischer & Turner, 1970) were among the most examined demographic factors that were reported to be related to people's help seeking attitudes and intentions. Being male predicted more negative attitudes towards help-seeking. Moreover, having no previous psychological treatment experiences (Kushner & Sher, 1989), low educational level, having more concerns about monetary costs of the treatment and low awareness of mental health resources were other important demographic factors predicted people's negative attitudes toward help-seeking, as well as their unwillingness to seek psychological help (Komiya, Good & Sherrod, 2000).

Studies in Turkey have examined many factors that are conceptualized in close relation with the help seeking process. Using a qualitative method, Topkaya (2015) determined the most important factors that predict Turkish adults' decisions of seeking help for their psychological problems. According to analysis of the interviews conducted with 4 female and 6 male participants, two important themes

that effect help seeking process were identified: inhibiting factors and facilitating factors of people's help seeking. Most prominent factors that was reported by the participants as inhibiting were the fear of social stigma, reluctance to share problems with a counselor as an unknown person, the belief about the secrecy and privacy in terms of personal problems, one's belief of having the ability to resolve the problems without any help, and the lack of information about the mental health help process. On the other hand, factors that facilitate the process were determined as psychological services being accessible, the help source's being free, trusting the professional help sources, the beliefs about benefits of receiving help.

Koydemir-Özden and Erel (2010) investigated the effects of socio-demographics, perception of a problem and previous help-seeking experience on the attitudes toward seeking psychological help among undergraduate students. The results indicated significant effects of all these variables. Similar with the previous findings, being female was found to be an important predictor of positive attitudes toward seeking help. Moreover, older age and higher levels of education among parents of the participants predicted more positive attitudes toward seeking psychological help.

According to the results of several studies, the role of self-stigma and social stigma was determined among the most prominent factors that affect people's attitudes toward seeking help from mental health professionals in Turkey. Additionally, both self-stigma and public stigma were found to be experienced more by men compared to women (Topkaya, 2014). On the other hand, the results of different studies showed contrasting results. In Bilican's (2013) study stigma was not found to have much significance in help-seeking process. Instead of stigma effect, seeking help from close ones and denial of mental health difficulties were reported as more significant indicators of Turkish university students' reluctance to seek psychological help.

Gender related factors were among the most examined factors as far as help-seeking process concerned. Researchers have determined gender, gender roles and gender of the counselor among the leading factors that affect Turkish people's

attitudes toward seeking help (Erkan, Özbay, Çankaya, & Terzi, 2012; Yılmaz-Gözü, 2013). Women's attitudes toward seeking psychological help were reported to be more positive than men's. Masculinity role was determined to be in correlation with negative attitudes toward seeking help from mental health field (Kalkan & Odacı, 2005). Türküm (2001) reported that gender was a predictor of the attitudes toward help-seeking, along with the ability of coping with stress and the level of cognitive distortions the individual has. Similar with the previous findings, female participants' attitudes toward seeking psychological help were more positive compared to male participants.

Among the factors that have been delineated by studies in Turkey, problem areas, psychological symptoms and perceived psychological distress have become other prominent variables. Erkan, Özbay, Çankaya and Terzi (2012) reported that economic, emotional and academic problems consisted the majority of university students' problem areas. Several problem areas, (sexual, substance use, personality, accommodation, emotional and relationship problems) have been determined to be in correlation with the attitudes toward seeking psychological help. On the other hand, sexual, familial, personality, romantic and academic problems predicted the intentions to seek psychological help.

Furthermore, social support was determined as a predictor of help seeking process in Turkey. Aydın (2017) found that there was a significant relationship between perceived social support and willingness to seek psychological help. As far as the type of problems concerned, the results indicated that having problems related to personality highly predicted the willingness to seek help, whereas, having economic problems constituted the lowest level of willingness to seek psychological help. Other studies indicated that people who had high levels of social support reported more positive attitudes toward psychological help seeking compared to the ones who perceived lower levels of social support (Koydemir-Ozden, 2010). This finding was interpreted that social support might be providing people to be referred more easily to the help available, and social network might be assisting the process of coping with problems. These benefits might be making

people to have more positive attitudes towards the help-seeking process. Likewise, Seyfi, Poudel, Yasuoka, Otsuka and Jimba (2013) reported that higher levels of perceived support predicted more positive attitudes toward seeking help from mental health professionals. Additionally, gender (being male) was again reported to be a significant predictor in help seeking process in Turkey (Seyfi, Poudel, Yasuoka, Otsuka & Jimba, 2013). Women were reported to have more positive attitudes toward psychological help-seeking. This might be because of the common expectations from men to be more strong and self-sufficient than women, also being in high control of their emotions. Depending on others by seeking help does not seem to be suitable with gender roles traditionally given to men and women in Turkey.

Finally, the relationship between attachment styles and psychological help-seeking attitudes were examined in Turkish university students. According to the results, more positive attitudes toward seeking psychological help was found to be mostly predicted with secure attachment style compared to fearful and preoccupied styles (Irkörücü & Demir, 2015). According to this finding, it was hypothesized that secure attachment might have formed the basis for people's having more intentions to share personal issues with others and being more inclined to seek support for their problems.

1.1.4 Emotional Expression and Psychological Help-Seeking

Emotional expressiveness is defined as the display of emotions through any kind of channels regardless of the emotion is being positive or negative (Kring, Smith & Neale, 1994). Expression of emotions is thought to be a healthy behavior, whereas, emotional restrictedness was proven to be psychologically unhealthy and it is also a precursor of physical illness (Awada, Bergeron, Steben, Hainault & McDuff, 2014; Pennebaker, 2012).

Emotional expression is known to be positively correlated with treatment outcomes in all therapeutic approaches. Individual differences in emotional

expressiveness has recently increased the interest in emotion research. Scholars from cognitive-behaviorist and humanistic approaches mostly examined processing emotions and the depth of experiencing emotions. These subjects have been indicated to be extensively related to psychotherapy outcomes. Accumulating research evidence shows that both experiencing emotions in therapy sessions and exploring their meaning and significance are crucial for change in psychotherapy (Whelton, 2004). Similarly, the expression of here-and-now feelings in therapeutic encounter is important for existential psychotherapy approaches. Moreover, traditional psychoanalysis considered the discharge of suppressed emotion through catharsis as a beneficial therapeutic effect (Freud, 1916). Recently, case studies were usually used in the psychodynamic psychotherapy studies about emotion processes. Lecours, Bouchard, St-Amand and Perry (2000) made an intensive analysis of 14 sessions of a psychodynamic therapy process to examine affect tolerance and affect expression. The analysis showed that negative affect were tolerated and expressed less frequently than the positive ones.

Scholars made a distinction between approach factors and avoidance factors in understanding the process of seeking psychological help. *Approach factors* are those that increase the likelihood that an individual will seek psychological help, whereas, avoidance factors decreases this likelihood. The distress level of an individual and perceived severity of psychological problems are well-examined instances of approach factors when it comes to the decisions to seek psychological help. Treatment fearfulness (Deane & Todd, 1996), the tendency to conceal stressful information and, negative beliefs about expressing and experiencing distressing emotions are among the avoidance factors in psychological help-seeking process. However, emotional expression as an avoidance factor has received little attention from scholars in spite of its potential contribution to understanding people's reluctance to seek psychological help. Studies have found that an important number of psychotherapy clients keep secrets from their therapists because of their fear of expressing strong emotions that are loaded in their secrets (Hill, Thompson, Cogar, & Denman, 1993). Greenson (1987) also emphasized the fear of experiencing painful affect as a source of resistance to psychoanalytic

treatment. Komiya, Good and Sherrod (2000) examined the effects of emotional openness and other potential predictors of help seeking attitudes. The results indicated that individuals who have more positive orientations towards emotional experience, and those who do not avoid talking about their emotions, perceive less stigma associated with seeking psychological treatment. People's comfort with expressing emotions positively affected the decision to seek psychological help, whereas, people's perceptions about both experiencing and expressing negative emotions was found to be the most significant barrier to seeking counseling (Komiya, Good & Sherrod, 2000). Previous research suggested that people are afraid of being ashamed and embarrassed because of sharing their problems with counselors as they perceive them as relative strangers (Lin, 2002). As such, Harris, Dersch and Mittal (1999) indicated that distressing emotional expression can make clients feel vulnerable as there is a perceived risk of being misunderstood, ridiculed, judged or ignored as a consequence of disclosure.

Revealing personal information like emotions, beliefs or thoughts to others is called the self-disclosure. Kahn, Achter and Shambaugh (2001) examined self-disclosure in relation to perceived stress and client's symptomology during the psychotherapy process. According to the results, self-disclosure was positively correlated with decrease in perceived stress and the occurrence of symptoms. Several studies underlined the importance of paying attention to the disclosure tendencies as it was strongly associated with positive changes in psychotherapy (Farber, Berano & Capobianco, 2004; Kahn, Vogel, Schneider, Barr, & Herrell, 2008). However, self-disclosure has not received enough attention as a possible predictive factor in the process of psychological help-seeking.

A couple of studies have examined the relationships between self-disclosure and psychological help-seeking. Cepeda-Benito and Short (1998) explored self-concealment, the tendency to keep personal information discreet, and found that high levels of self-concealment predicted avoidance of seeking psychological treatment. Self-concealment also canceled the association between lack of social support and tendency to seek help. That is to say those who are high in self-

concealment avoided seeking psychological help even when they lacked social support. In addition, the results showed that high level of self-concealment made one's possibility to seek psychological help three times less likely, even in the special condition of experiencing distress. Similar results of another study (Kelly & Achter, 1995) indicated that the tendency to conceal personal information was in strong relationship with negative attitudes toward seeking psychological help, along with lower intentions of help-seeking.

Hinson and Swanson (1993) also examined help-seeking in interaction with two different aspects of self-disclosure, and the severity of personal problems. In this study, help-seeking was defined as seeking help from anyone, such as family, friends or a mental health professional. The results revealed a variance between self-disclosure tendencies, severity of the problems and help-seeking attitudes.

Omarzu (2000) examined principles of disclosure behavior and proposed a model that explains the decision process in self-disclosure. The researcher conceptualized disclosure as a strategy for accessing goals that includes risk or utility. *Anticipated utility* is defined as the individual's perception about the value of disclosure outcome, whereas, *anticipated risk* refers to perceived negative outcomes of disclosure. On this basis, Vogel and Wester (2003) thought that the anticipated risks of self-disclosure were among the factors that make people avoid seeking help. With a two-part research, firstly they identified risk and utility factors associated with self-disclosure. The results indicated that perceived risks of self-disclosure, as well as the anticipated benefits of it predicted the participants' attitudes toward seeking psychological help, constituting the risk and utility factors in help-seeking process, respectively. According to these findings, the authors proposed that risk and utility factors effected the help-seeking process independently. Moreover, they examined the relationship between the concerns about disclosing six different emotions to a specific person such as a psychotherapist and attitudes toward seeking help. A significant relationship was proposed between expectations about expressing six different emotions and attitudes toward seeking help. Nonetheless, none of these emotions were significant

in terms of their relationship to help-seeking attitudes. This finding was interpreted that what predicted the individual's attitudes toward seeking help was their general concern about emotional disclosure as no particular emotion strengthened the proposed relationship. In the second part of the same study, the scholars explored the relationship between newly identified risk and utility factors and previously reported approach factors in help-seeking literature: The level of distress and social support, biological sex (being female) and having previous counseling experience. The results showed that avoidance factors predicted the attitudes towards help-seeking better than the approach factors. Moreover, one of the avoidance factors, one's tendency to conceal stressful information, was found to be a predictor of both negative attitudes towards and intentions of seeking psychological help.

Similarly, the results of another research showed that the anticipated risks and anticipated benefits of emotional disclosure mediated the relationship between help-seeking attitudes, willingness to seek psychological help and emotional expression (Vogel, Wade & Hackler, 2008). The mediating effect of anticipated risks on the attitudes toward seeking help was reported higher than the effect of anticipated benefits. According to similar findings, along with its high effect on individuals' attitudes toward seeking help, emotional expression was also found to have an impact on people's willingness to seek psychological help (Vogel, Wester, Wei & Boysen, 2005).

Moreover, the scholars proposed other avoidance factors in psychological help-seeking process. Gender, age and cultural factors, as well as the factors in treatment settings and problem type were among the situational and demographic avoidance factors. Social stigma, fear of treatment, fear of expressing and experiencing painful emotions, anticipated utility and anticipated risk, avoidance of disclosing personal information, negative social norms about seeking psychological help and low self-esteem were reported as psychological and social factors that make people avoid seeking help from mental health professionals (Vogel, Wester & Larson, 2007).

In Turkey, there is a lack of research concerning the relationship between emotional expression and psychological help-seeking. However, few studies examined a related concept called *self-concealment* in relation to help-seeking. Self-concealment is a psychological concept that explains one's tendency to preserve personal distressing information rather than disclosing it. Serim and Çankaya (2015) examined the effect of self-concealment, gender, emotional expression on psychological help-seeking attitudes of Turkish adults. The results of multiple regression analysis showed that all these factors predicted help-seeking attitudes. However, the effect of self-concealment was reported to be more significant compared to the effect of gender and tendency to express emotions. Moreover, Erkan, Özbay, Cihangir-Çankaya and Terzi (2012) recruited college students in order to examine their intentions to seek psychological help. They hypothesized age, gender, gender roles, previous help-seeking experience, perceived social support, self-concealment, problem areas, perceived difficulty of current psychological problems and the attitudes toward seeking psychological help as predictors of help-seeking intentions. Unexpectedly, the results showed that self-concealment did not predict help-seeking intentions, while less negative attitudes toward seeking help, being female, having problems concerning academic, familial, personality or sexuality subjects were in high correlation with current willingness to seek psychological help in college students.

On the other hand, the results of a qualitative study indicated the significant effect of self-disclosure as a barrier to help-seeking (Koydemir, Erel, Yumurtacı & Şahin, 2010). The analysis of interviews with 15 students revealed the most common problems, the sources preferred for dealing these issues and the most frequent barriers in help-seeking process. Interpersonal issues, problems with staff and authorities in campus and concerns about future were determined as the most important difficulties of university students. The participants' perception of their difficulties as manageable without getting any help and their preference not to disclose themselves to others were the most common barriers in help-seeking process. They only reported to have sought professional help when they perceived their problems as being of great importance.

1.1.5 Beliefs About Expressing Emotions

The beliefs about emotions is a concept that incorporates people's attitudes toward several different aspects of emotions including their meanings, nature and impact on one's life, the effects of experiencing and expressing them (Rimes & Chalder, 2010).

For an efficacious psychotherapy process, it is important to understand the client's emotions and to be able to talk about them. Negative beliefs about emotional expression is crucial not only for its significant impact on the treatment process, but also for the development of psychological problems. Cognitive-behavioral perspective underlines the crucial role of the beliefs about experiencing and expressing emotions in the outset and development of various psychopathologies (Surawy, Hackmann, Hawton & Sharpe, 1995). Corstorphine (2006) emphasized that, many of the psychological treatment processes aim to make patients tolerate distressing emotions. However, working out the deeper beliefs about experiencing and expressing emotions may not become one of the focal points of a treatment process. Negative beliefs about expressing emotions was proven to be in close relationship with the clients' having difficulty in talking about their feelings undisguisedly during psychotherapy sessions. Bishop, Marino and Dooley (2014) examined themes related to the beliefs about expressing emotions. The purpose of this qualitative research was to help counsellors understand the negative beliefs that might impede psychotherapy process. Researchers collected statements about the beliefs about expressing emotions and analyzed seven different themes. Some of the participants stated that expressing emotions is normal, while others believed that time, gender and situational factors impact emotional expression. Moreover, one of the important themes that emerged from the participants' beliefs was about the potential outcome of emotional expression to make people feel vulnerable.

Proposing a cognitive model of emotional schemas, Leahy (2002) found that people perceive emotions as poisonous, uncontrollable, dangerous, difficult to

handle, overwhelming, incomprehensible or useless. The participants of a qualitative study also stated that emotions were poisonous, dangerous and should be avoided. Moreover, the expression of emotions could harm both the person that makes the expression and the people around. Certain emotions were believed to be threatening in interpersonal encounters (Coggins & Fox, 2009). Anger was among those emotions that people tend to suppress to a great extent, holding the belief that expression of anger could deteriorate interpersonal relations (Geller, Cockell, Goldner & Flett, 2000).

Spokas, Luterek, and Heimberg (2009) examined the beliefs about emotional expression, social anxiety and emotional suppression. The results indicated that social anxiety was positively correlated with the restrictedness in emotional expression and more negative beliefs about expressing emotions. Moreover, emotional expression was believed to be an indicator of personal weakness especially for individuals who had high levels of social anxiety. Beliefs about emotional expression's being a sign of weakness and concerns about keeping emotional expression in control had a mediating effect on the correlation between emotional suppression and greater social anxiety.

1.1.6 Interpersonal Outcomes of Emotional Expression

Social psychology theorists suggest that emotions play an important role in interactions between people, while a very small number of clinical theorists take into account the interpersonal domain. The expression of distressing emotions is a behavior that may be in interaction with a complex of variables in interpersonal encounters. King and Emmons (1991) introduced the concept "ambivalence over emotional expression" in order to gain a better understanding of emotional expression phenomena in the interpersonal domain. This concept refers to the emotional conflict an individual may have about expressing emotions. Regardless of one's tendency to express his emotions, there may be a conflict between one's personal strivings about expressing his emotions and social norms he is subjected to. Ambivalence over expression can be helpful to understand the individuals who

are inexpressive because they are inhibiting the desire to express for some social reasons, as well as the individuals who are expressive and may sometimes regret their expressiveness because of similar reasons. For instance, the expression of an emotion may entail a conflict between the goal of intimacy and the goal of self-protection. Furthermore, Mongrain and Vetteuse also (2003) studied the concept of ambivalence over emotional expression and found that the level of ambivalence over expressing emotions led to submissiveness in relationships for female participants. The authors interpreted the findings that individuals' underlying assumption about negative interpersonal outcomes of emotional expression might cause the ambivalence over the expression.

Similarly, Kennedy-Moore and Watson (2001) conceptualized emotional expression as a social mechanism because it necessitates an interaction with others. They proposed three mechanisms by which emotional expression alleviates the distress and enhances an individual's wellbeing. First mechanism conveys that the expression of emotions effects interpersonal relationships according to one's desires. Specific interpersonal benefits of expressing emotions are their abilities 1- to alter relationships in a positive way, 2- to obtain support from others and 3- to reduce distress that emerged from relational encounters. Intimacy in relationships can be formed by the condition of knowing someone deeply. Expression of emotions can help enhance people's intimacy as it provides the opportunity to know the other people better. Expression also provides a norm in which the other one is expected to reciprocate the expression, and this interaction enhances the intimacy further. Moreover, expression of fear and sadness can be perceived as a sign of being vulnerable, and evoke compassion in others. In contrast, expression of anger and disgust can give an impression of being independent and outline one's boundaries in interpersonal domains (Greenberg & Johnson, 1990).

1.1.7 Cultural Factors Related to Emotions and Help-seeking

Culture is an important domain of interest for a broad understanding of emotional expression as it has been shown to influence both experience and

expression of emotions in individuals. Theories of culturally-based self-construal, based on the individualism-collectivism typology, suggest that cultural construal of the self is embedded in one's identity, shaping the content of one's cognition, affect and behavior. From a cultural perspective, in interdependency (vs. individualism) where the emphasis is placed on harmony (Markus & Kitayama, 1991), what mostly matters is one's relationships with others compared to the importance of one's self-strivings. The identity of individuals who have an interdependent tendency is highly integrated with their significant others. On the other hand, independent self-construal entails an understanding of self as an entity separate from others, whose priorities are one's own interests, instead of relationship priorities. A person with an interdependent self focuses on the strength of the relationships and maintaining group harmony, whereas a person with an independent orientation consider his autonomy highly important. Cross-cultural research suggests that Asian cultures are collectivist societies and people are regarded as highly interlaced with the external and social spheres of society. In contrast, in Western cultures people are encouraged to promote and maintain their individual sense of self and act in accordance to their own free will (Markus & Kitayama, 1991).

Based on Markus and Kitayama's (1991) theory, independent cultures (e.g. American and European culture) tend to value emotional expression, whereas more interdependent cultures (e.g. Chinese culture) tend to value emotional control, mostly in order to protect interpersonal harmony. Out of this hypothesis, Markus and Kitayama (1991) proposed socially engaging and disengaging emotions in order to understand the relationship between self-construal and affect. According to that theory, people with an individually oriented self-construal tend to experience and express more socially disengaging emotions such as pride and anger. On the other hand, those with an interdependent orientation of self tend to experience emotions, like guilt and relatedness, that are conceptualized as socially engaging emotions. This hypothesis has gained empirical support (Kitayama, Markus & Kurokawa, 2000; Suh, Diener & Updegraff, 2008).

Display rules is a concept that explains the differences between display of basic emotions in different cultures (Ekman & Friesen, 1969). Cultural norms effect how people express different emotions, determining the suitable time, setting and respondent of emotional expressions and experiences of individuals. Although display rules are critical for understanding emotional experience elaborately, few cross-cultural studies examined this subject directly. Empirical support was provided as to the effect of cultural values on people's emotional expression. (Matsumoto, Yoo & Fontaine, 2008; Safdar, Friedlmeier, Matsumoto, Yoo, Kwantes, Kakai & Shigemasu, 2009).

From a cultural point of view, emotions are interpersonal experiences that are intertwined with the social context they are displayed in. Several features of social contexts in different cultures produce different norms about emotional display. For instance, according to recent studies, expression of happiness is highly valued in individualistic cultures, whereas, expression of positive emotions is more restricted in collectivist cultures (Eid & Diener, 2001). Similarly, expression of anger is also less frequent in collectivistic cultures as it may damage harmony in relationships. On the other hand, anger expression may be tolerated in individualistic cultures, usually because it is seen as highly related to individualistic values such as self-assertion and freedom. Anger, disgust and contempt are thought to have more power over the social interactions, whereas, sadness and fear are not so powerful and threatening to the relationships. Consequently, people in collectivist cultures were reported to be more accepting towards the expression of these emotions (Safdar et al., 2009).

In Turkey, Boratav, Sunar and Ataca (2011) examined the emotional display rules as part of a cross-cultural study (Matsumoto, Yoo & Fontaine, 2008). Participants were asked about what they prefer to do when they feel seven basic emotions (anger, contempt, disgust, fear, happiness, sadness and surprise) in different contexts. The contextual aspects evaluated were the setting and 20 target persons. Along with the reported determining quality of the nature of those different emotions, it was found that contextual aspects also predicted the expression of

emotions. Happiness was the most easily expressed emotion. Surprise, sadness, anger, fear, contempt and disgust followed it. Moreover, the closeness in relationships, social status of the target person and setting affected people's expression preferences.

Furthermore, a few scholars have examined culture as a moderating factor between emotional restraint and different social goals. Wei, Su, Carrera, Lin and Yi (2013) indicated that individuals in interdependent cultures tend to value emotional suppression in order to preserve interpersonal harmony, whereas, this purpose was not found to be significant for independent cultures. Another study indicated that Asians tend to suppress their emotions to preserve relationships. However, the main reason for emotional suppression for European Americans was found to be the self-protection aims, rather than preserving relationship harmony (Wei, Su, Carrera, Lin & Yi, 2013). Protecting the self in interpersonal contexts can be explained one's tendency to prioritize the personal interests instead of the interests of social group. Self-protective goals include low affiliation and high assertiveness, that is to say a tendency to remain detached from others and being on guard against the possibility of rejection and ridicule by others. The Chiang (2012) also studied the interpersonal factors that make people avoid emotional expression in a highly interdependent culture. The results indicated that the wish to maintain relationship harmony as one of the most important factors. Moreover, Butler, Lee and Gross (2007) proposed cultural group as a moderator between emotional suppression and social goals. Suppression was associated with self-protective goals for Americans holding Western values, whereas, it was not significant as far as Asian values were concerned. These findings suggest that cultural values determine the reasons behind emotional experience of people. Self and other-focused reasons, namely harmony protective and self-protective interpersonal goals, have empirical support as two main social determinants of emotional suppression.

Self-construal has been examined as a crucial factor that may influence individuals' attitudes toward seeking help. It was found by several studies that being more interdependent predicted more positive help-seeking attitudes, whereas

independent self-construal was associated with negative attitudes toward seeking psychological help (Tata & Leong, 1994; Yeh, 2002). On the other hand, it was also suggested that individuals with interdependent self-construal may avoid the counseling process as this process involves experiencing intense emotions which may in turn be risky for social harmony. Interpersonal relatedness is characterized by giving high priority to the needs and wishes of close others while making decisions (Cross, Bacon, & Morris, 2000). People with high levels of interpersonal relatedness may avoid counseling due to relational considerations and negative perceptions about the consequences of emotional expression (Yeh & Wang, 2000; Shea & Yeh, 2008). This hypothesis was actually derived from the highly interdependent Asian people's avoidance of help-seeking but it has not been tested much. There is a lack of research that examines the relationships among self-construal, emotional expression and help seeking. However, Shea and Yeh (2008) examined how adherence to Asian values, which includes emotional restraint and relational-interdependent self-construal, predicted attitudes toward seeking psychological help. The results showed that lower adherence to Asian values and higher relational interdependent self-construal predicted more positive help-seeking attitudes.

In Turkey, only one study examined the relationship between cultural influences on help-seeking process. Koydemir-Ozden (2010) examined the effect of self-construal, gender and social support on attitudes toward seeking psychological help. The results indicated that both individual and relational self was associated with positive attitudes toward seeking psychological help in university students. Being female, having support from close ones were the other predictors of positive help-seeking attitudes in this study.

1.1.8 Self-construal and Personal Styles: Sociotropy-Autonomy

Self-construal concept was first proposed by Markus and Kitayama (1991). It was described as a conceptualized of one's self that was constructed via the important effects of social encounters and more broadly, cultural norms. Social

construction of one's self shapes basic human experiences as the cognition, emotion and motivation. According to the model of Markus and Kitayama (1991), independency and interdependency provides a basis upon which individuals develop different perspectives about the self and relations with others. Perceiving the self-independent from others effect life motivations of individuals and is expected to make an individual prioritize the personal life tasks. On the other hand, in terms of interdependency, the prioritized tasks are expected to have more interpersonal outcomes as the goals of social group precede individual achievements. As far as cognitive consequences are concerned, interdependent self was linked to paying more attention and being more sensitive to others, as well as gaining more interpersonal knowledge. Furthermore, emotional consequences of independent and interdependent self-construal were reported to have significant differences. Independent selves are proposed to be more inclined to express ego-focused emotions that provide the opportunity to prioritize one's internal goals and desires. Anger, frustration and pride are among these emotions. Furthermore, frequent experience and expression of these emotions provide maintenance and affirmation of autonomous feature of independent self-construal. In contrast, interdependent construal of self provides an inclination of the experience and expression of other-focused emotions such as sympathy, shame and the feeling of communion. These emotions are proposed to be related to interdependency as they refer to reciprocal exchanges in relationships and lead individuals be cooperative with others. Adding to the cognitional and emotional differences, independent and interdependent self-construal differentiated in terms of individuals' life motivations. Main motives of interdependent selves are expected to be more social ones such as nurturance, protecting others and avoidance of blame. Achieving autonomy, accomplishing difficult tasks without any help and being competent can be accounted of the common life motivations of those who have a more independent orientation of self. In conclusion, what differentiates the relational considerations of people with different orientations of self are conceptualized as the cognitive, emotional and motivational differences.

Another related concept that was developed to describe individual-level differences in how one organizes relationships to others were the personality orientations of sociotropy and autonomy (Clark & Beck, 1991). These concepts refer to two different personality styles. *Sociotropy* determines an individual's tendency to seek positive interactions with others. It is defined as the tendency to be socially dependent and to invest more in gaining understanding and support from others. Pleasing others and preserving the positive interchange in relationships, as well as gaining acceptance and approval of other people are common in highly sociotropic people. Moreover, self-esteem of sociotropic people is usually provided by the support of others. In accordance, endorsement, respect and love of others are indispensable in order to sustain positive self-perceptions for a highly sociotropic person.

On the other hand, *autonomy* refers an individual's tendency to be independent and free. Individuals who have more autonomous personality styles seek for independence, give high priority to individual accomplishments and an individualistic point of view that usually make them insusceptible to the demands of other people. Moreover, self-determination theory conceptualizes autonomy as a fundamental psychological need for having an internal focus of control and determining the sense of self (Deci & Ryan, 1985). Autonomy was also found to be in association with interpersonal insensitivity and having much problems in relationships (Clark & Beck, 1991). Achieving personal goals is perceived very crucial for highly autonomous people. In accordance, depressive symptoms were proven to arise especially when they experience failure in reaching personal standards. Moreover, intense negative feelings as self-criticism, guilt and inferiority also emerge along with that (Blatt & Zuroff, 1992).

Cognitive model of depression proposes that loss in interpersonal area may cause sociotropic people to be vulnerable for depression, whereas experiencing threat against independence and personal goals may cause depression in autonomous individuals. Sociotropy and autonomy are not fixed traits of personality, they are rather the features that may have an impact on one's

psychological mechanisms. Additionally, these personal styles were conceptualized as independent factors. An individual may have high or low levels of both styles, or have an inclination for one of them. However, some life events may change one's inclinations in terms of these personal styles (Clark & Beck, 1991).

Although self-construal and personal styles were intertwined concepts, little research examined the links between those. Sato and McCann (1998) examined the relationship between self-construal and personal styles, sociotropy/autonomy. Results revealed that sociotropy was positively correlated with interdependent construal of self. On the other hand, autonomy was found to be partly related to independent self-construal. The authors conducted a factor analysis in order to reveal the effect of these factors when they are integrated. Four factors emerged from the combination of the items of three scales, one that measures the self-construal the others measure sociotropy/autonomy. Additionally, significant relationships were reported between three of these new factors and depression, as expected. Gorski and Young (2002) examined the relationship between sociotropy/autonomy, self-construal, response style and gender. They reported a significant relationship between sociotropy and interdependent self. Moreover, gender was a predictor of the relationship between sociotropy/autonomy and response style (Gorski & Young, 2002).

1.2 OBJECTIVES OF CURRENT STUDY

In the current study, the links between the beliefs about expressing and experiencing negative emotions of sadness and anger, the relative importance people give to sociotropy/autonomy and their attitudes toward psychotherapy were examined. Nowadays, working on emotions is one of the key aspects of any kind of psychotherapeutic approaches. For instance, understanding the emotional components of psychological difficulties and psychopathologies, as well as working on the regulation of negative emotions are the key aspects of cognitive and psychodynamic psychotherapeutic modalities. A significant relationship between the restrictedness in expression of emotions and negative attitudes towards seeking

psychological help was shown by many studies. People usually have the knowledge that getting psychological help usually includes interventions about one's feelings. Thus the discomfort of experiencing negative emotions, reluctance and uneasiness of expressing them constitutes a significant barrier to not only getting help but also to the previous help-seeking process. Many studies highlighted the crucial role of emotional factors in help-seeking process (Hill, Thompson, Cogar, & Denman, 1993; Komiya, Good & Sherrod, 2000; Vogel & Wester, 2003; Vogel, Wester & Larson, 2007).

In Turkey, studies have examined many factors that are proven to be highly related to the psychological help seeking process. Problem areas (Topkaya, 2015), perception of a problem (Bilican, 2013), previous help-seeking experience (Koydemir-Özden & Erel, 2010), self-stigma and public-stigma (Topkaya, 2014), gender, gender roles and gender of the counselor (Erkan, Özbay, Çankaya, & Terzi, 2012; Yılmaz-Gözü, 2013), social support (Aydın, 2017; Koydemir-Ozden, 2010; Seyfi, Poudel, Yasuoka, Otsuka & Jimba, 2013) and attachment styles (Irkörücü & Demir, 2015) were among the factors examined in relation to the help-seeking process. However, only Topkaya (2013, 2014, 2015) focused specifically on the attitudes towards psychotherapy while examining the psychological help-seeking process. This lack of research seems important knowing that psychotherapy is not the foremost kind of help preferred by people in Turkey. The current study aims to contribute the lack of research in this area.

On the other hand, very few studies have investigated the relationship between emotional expression and help-seeking in Turkey. With the review of the previous literature, it was observed that no study has yet examined the relationship between the beliefs about emotions and the attitudes toward psychotherapy in Turkey. According to the proven relationship between emotional restrictedness and negative attitudes towards seeking help, it is crucial to understand the effect of emotions on the people's attitudes towards psychotherapy in a deeper way.

Although the link between reluctance to express emotions and avoidance of psychological help-seeking is well-established in the literature in general, the

specific reasons for avoiding emotional expression and its connection to attitudes towards help-seeking has not been studied much. Therefore the present study has the main purpose of understanding the possible reasons for lack of emotional expression and the potential role of cultural variables in this process. It is well-established that cultural variables have an impact on the way emotions are experienced and displayed. Cross-cultural studies examined emotional display rules and provided empirical support for cultural effect on the expression of emotions (Matsumoto, Yoo & Fontaine, 2008; Safdar et al., 2009). In Turkey, display rules of seven basic emotions (anger, contempt, disgust, fear, happiness, sadness and surprise) were examined according to different settings and target persons. The results indicated that happiness was the most easily expressed emotion. It was followed by surprise, sadness, anger, fear, contempt and disgust. Moreover, the closeness in relationships, social status of the target person and setting were reported to be effective on people's preferences to express their emotions (Boratav, Sunar & Ataca, 2011).

In collectivistic cultures where a stronger interdependent self-construal is seen an important motivation that organizes emotional life is maintaining interpersonal harmony and avoiding conflict. Therefore expression of particularly negative emotions such as anger is restricted (Markus & Kitayama, 1991). However, in individualistic cultures, independent self-construal tends to be stronger enhancement of individual goals and personal accomplishment and autonomy is valued to a higher degree. Correspondingly, direct expression of anger is utilized more in order to protect personal boundaries and to achieve individual goals. Another individual level concept that is linked to cultural variables of independence/interdependence is sociotropy/autonomy. The organizing principles of *sociotropy* are seeking positive interactions with others, gaining and maintaining support as well as acceptance of others. Consistently, the main risk of expressing anger may be losing the ability to preserve interpersonal harmony that comes from mutual understanding, support and acceptance. In contrast, expression of sadness is expected to be beneficial for making people emotionally more close to each other, thus, increasing the mutual support. Furthermore, *autonomy* is mainly organized

with the tendency to be independent and free. High prioritization of individual accomplishments and individualistic views are common principles of autonomous self. Consequently, expression of anger is expected to be more suitable with autonomy as it may be helpful to protect one's boundaries with others, thus provide maintenance of individualistic wishes, purposes and strivings. However, expression of sadness is expected to be perceived harmful by more autonomous individuals as it may risk one's self-sufficient image and personal boundaries, inviting others to give support and acceptance.

Hence this study aims to examine the relationship between the specific reasons for negative and positive views towards emotional expression and how this relates to the attitudes towards help-seeking. It is expected that if sociotropic orientation is stronger, more relational concerns about emotional expression would be significant. That is to say people would refrain from emotional expression with the concern that it would damage their relationships. Similarly, the benefit of emotional expression would be that it could promote intimacy. For people who are stronger on the autonomy domain the main reason for refraining from emotional expression is may be the fear of losing control and the benefit would be the advancement of individual goals.

Understanding the negative beliefs about experiencing and expressing sadness and anger is important because of several reasons. First of all, difficulties with the regulation of these emotions is a well-examined symptom of severe psychopathologies (Werner & Gross, 2010; McWilliams, 2011; Plutchik & Kellerman, 2013). Zeman, Shipman and Suveg (2002) reported that an individual's inability to recognize anger and sadness, as well as inhibition or dis-regulation of these emotions were related to internalizing and externalizing symptoms of psychopathologies. Since the emergence of cognitive theory the relationship between emotions and psychopathologies have been highlighted. For instance, sadness was first conceptualized as a production of an individual's cognitive appraisal of loss. Thus sadness and its cognitive determinants were thought to comprise the way to depression, whereas anger production along with its cognitive

determinants was related to paranoid states (Beck, 1974). According to developmental psychology, emotion dysregulation and intolerance of negative affect are known to be the prominent factors in the psychological disorders of children and adolescents (Cole, Hall & Hajal, 2008). Moreover, in traditional psychoanalysis, suppression of distressing affect was conceptualized as the foremost defense mechanism. Anger was thought to be one of the most suppressed emotions as the internalized rules of the society inhibit its free expression. Suppressed unconscious material induces conflict between psychic states, thus the conflict leads to psychopathological experiences such as hysteria, phobias and obsessions (Freud, 1916). As a consequence of the pivotal role of emotion in psychological difficulties and psychopathologies, it is useful to understand the role of distressing emotions more deeply when it comes to seeking psychological help. This study aims to contribute to that understanding the unique role of the beliefs about the two distressing emotions, sadness and anger. Although literature mainly focuses on the negative beliefs about expressing emotions, beliefs about the benefits of emotional expression can also be an important factor that determines attitudes towards psychotherapy. Many people in fact come to therapy with the desire to have a place to express themselves. Therefore the present study aims to study both the benefits and risks of expressing anger and sadness.

This study specifically focused on young people's attitudes towards psychotherapy as young ages are known to be critical for the emergence of mental health problems. Several developmental tasks need to be succeeded once the individuals step into the young adulthood. Forming an identity, making decisions related to career and gaining the capacity to love and be loved are among the most crucial ones (Erikson, 1968). The necessity of achieving these tasks may be very stressful for a young adult and many psychological problems may emerge during this course (Dubow, Lovko & Kausch, 1990). Seeking psychological help when necessary is thought to be an effective coping strategy for a young person, especially for preventing severe negative outcomes of psychological distress (Rickwood, Deane, & Wilson, 2007; Wilson & Diane, 2010).

Although many people have difficulties in expressing negative emotions of anger and sadness, the reasons for refraining from expressing these emotions seem to be different. Those people who are high in sociotropy- concerned about interpersonal relationships- tend to suppress expression of anger out of concern that it would damage interpersonal harmony. However, those that are high in autonomy- value autonomous achievement highly- avoid it due to concern that it would make them look weak and not in control. These orientations are conceptualized as orientations at the personal level however they are theorized to be influenced by the larger cultural context (Sato & McCann, 1998).

Countries like Turkey include both Western and non-Western values. Turkish culture is found to be neither predominantly collectivist nor individualist in terms of self-orientation (Göregenli, 1995). Traditional Turkish society is considered to have a collectivist and interdependent tendency in which family ties and close relationships, as well as involvement in social groups are highly emphasized (Kağıtçıbaşı, 2005). However, since the 1980's, a rapid movement toward globalization and social change has led Turkish people to experience more individualistic attitudes. Moreover, researchers indicate that currently emerging individualism cannot be a reason for the decrease in interdependent tendencies in relationships in Turkey. According to recent studies, two different aspects of self-construal exist together in self-conceptions of Turkish young people (İmamoğlu, 1998; İmamoğlu & Karakitapoğlu-Aygün, 2002). Culture has also been found to be a significant factor that affects emotional display rules (Matsumoto, Yoo & Fontaine, 2008). In Turkey while people believed that all emotional expression should be toned down to a certain degree, happiness was found to be the most easily expressed emotion. Anger, contempt and disgust were suggested to have a threatening impact on social relationships; in accordance with this, those emotions were found to be more closely regulated by the social situation (Boratav, Sunar & Ataca, 2011).

The present study aims to examine the relationship between beliefs about expression of negative emotions and attitudes towards psychological help-seeking.

The study further aims to examine the impact of personal orientations of sociotropy and autonomy as factors that affect the reasons for reluctance towards emotional expression. Even though certain studies exist on the connection between emotional expression and attitudes towards psychotherapy, the particular reasons for this relationship has not been studied. The present study aims to measure individuals' assessment of both risks and benefits of expressing two main negative emotions anger and sadness, in terms of furthering individual autonomy and enhancing or preserving interpersonal relationships, and how these assessments are linked to help-seeking attitudes.

In order to examine beliefs about the risks and benefits of expressing emotions in both personal and relational domains a new measure was developed based on the review of existing measures. All the previously developed scales measure the tendency to express sadness and anger and the preferred way to express those emotions. Additionally, the existing measures mostly focused on negative beliefs about emotional expression such as emotions' being contagious, overwhelming or irrational. In the current study, sadness and anger were chosen because of their proven importance in psychotherapy field. Moreover, the new scale was designed to incorporate not just the negative beliefs but also the positive beliefs about emotions. Additionally, in order to decipher the specific reasons for valuing or refraining from emotional expression we needed a scale that included personal or relational factors. For that purpose, a new measure was developed through adding items to The Beliefs About Emotions Scale (Manser, Cooper & Trefusis, 2012). The new measure included sub-factors that measured positive and negative beliefs about expression of sadness and anger in the personal and relational domains.

In conclusion, the purpose of this study is to examine some of the emotional and interpersonal factors that are thought to have an impact on psychological help-seeking attitudes of Turkish young adults. As young people (age 15-24) are known to constitute approximately 30% of the population, an increase of the severity of psychological problems is inevitable if they do not get enough help (Koydemir-Ozden, 2010). However, there is a lack of research examining the emotional and

interpersonal predictors of help-seeking attitudes diffusively in Turkey. Thus, drawing from a different perspective, this study was conducted to provide a much needed window on the interaction of proposed factors. Considering the emotional and interpersonal factors within individuals, the major aim was to contribute to the theoretical understanding of people's underutilization of mental health services in Turkey. Additionally, practical implications for introducing psychotherapy to the community were discussed.

To summarize, in this study, the effect of beliefs about experiencing and expressing two emotions, *sadness* and *anger*, in personal and relational domains, the personal styles of sociotropy/autonomy were examined. The chief goal was to understand the impact of the beliefs about emotions on individuals' attitudes toward utilizing psychotherapy services. The second goal was to understand the possible relations between the beliefs about emotions and sociotropy/autonomy, as well the possible effect of personal styles on psychotherapy attitudes. The main questions are: "Are the beliefs about sadness and anger significant factors that affect people's negative attitudes toward psychotherapy?", "Is there a significant relationship between sociotropy/autonomy orientations of individuals and their evaluations of risks/benefits of emotional expression on the personal or relational domains., and "Are there any significant relations between the personal styles of sociotropy/autonomy and attitudes toward psychotherapy?"

The variables of this research model are as follows:

- Dependent variable: Negative attitudes toward utilizing psychotherapy services as measured by the Thoughts about Psychotherapy Survey.
- Predictor variable 1: Positive and negative beliefs about experiencing and expressing sadness and anger as measured by the Beliefs about Harm and Benefit of Emotions.
- Predictor variable 2: Personal styles: Sociotropy/Autonomy as measured by the Personal Style Inventory.

The hypotheses of the study are as follows:

Hypothesis 1: Beliefs about the harm and benefit of experiencing and expressing negative emotions (sadness and anger) would be associated with the attitudes toward utilizing psychotherapy services.

Hypothesis 1a: People who hold stronger beliefs about the harm of emotions (sadness and anger) were expected to report higher levels of negative attitudes toward psychotherapy.

Hypothesis 1b: People who hold stronger beliefs about the benefit of expressing emotions (sadness and anger) were expected to report lower levels of negative attitudes toward psychotherapy.

Hypothesis 2: There will be a connection between the personal orientations of sociotropy/ autonomy and participants' endorsement of the potential benefits and risks of expressing negative emotions in the personal or relational domain.

Hypothesis 2a: People who have a higher level of sociotropic style are expected to hold stronger beliefs about the harm of emotions (sadness and anger) in the relational domain rather than the personal domain.

Hypothesis 2b: People who have a higher level of autonomous style are expected to hold stronger beliefs about the harm of emotions (sadness and anger) in the personal domain rather than the relational domain.

METHOD

2.1 PARTICIPANTS

Our sample included 406 young adults studying in several universities in Istanbul, Turkey. Most of the participants were contacted through instructors in the Psychology Department at Istanbul Bilgi University and the data were collected via online survey. Other participants were contacted through instructors in Vocational School of Health Services in Istanbul Aydın University. Permissions were taken from the instructors to collect data in several classes. In addition, personal contacts were used to collect data from different universities via the online survey on the internet.

The limitation in terms of the participation was being in the age range between 18-35. Only exclusion criteria were age. Four participants who were older than the young adult category were excluded from the sample. The final sample included 406 people.

Participants ranged in age from 18 to 35. Mean age for the whole sample was 21 (SD = 2.69). The sample included 165 men (40.6%) and 241 women (59.4%). The participants were students who studied in several different majors at private universities in Turkey. Psychology and sociology were the most common majors studied in social sciences, whereas, medical school and engineering were the most common positive sciences studied by the participants.

Table 2.1 summarizes participant characteristics with regard to school status.

Table 2.1*Demographic Characteristics of the Participants (N = 406)*

		<i>N</i>	Percentage
Gender	Female	241	59.4
	Male	165	40.6
	Total	406	100.0
		<i>M</i>	<i>SD</i>
Age		21.66	2.69
		<i>N</i>	Percentage
University	İstanbul Bilgi	213	52.5
	İstanbul Aydın	66	16.3
	Boğaziçi	62	15.3
	Acıbadem	21	5.2
	Other	43	10.6
	Total	405	100.0
Major	Psychology	174	42.9
	Sociology	47	11.6
	Medical School	26	6.4
	Engineering	22	5.4
	Social Sciences	122	30.0
	Positive Sciences	11	2.7
	Total	402	99.0

Grade	First	100	24.6
	Second	122	30.0
	Third	63	15.5
	Fourth	73	18.0
	Masters/Doctoral	43	10.6
	Total	401	98.8

As far as previous experience in getting psychological help is concerned, 191 of the participants (47.0%) reported that they had received psychological help before, whereas, 215 of them (53.0%) reported the opposite.

Participants that have previous experience in getting psychological help were asked about the professional they got help from. The majority of the participants (49.3% of the participants who reported previous experience in getting psychological help) reported that they got help from a psychologist, while 27.7% got help from a psychiatrist, 15.2% of them reported to have gotten psychological help from a school counsellor, 5.2% reported that they got help from a psychological consultant and finally, 2.3% reported getting help from other professional sources such as a psychoanalyst, mentee or pedagogue. The percentages reported in this paragraph were inducted from the statistics that includes the whole sample.

Moreover, the participants that have previous experience in getting psychological help were asked about the duration of help. 184 of the whole sample (45.3%) answered this question. 3.7% of the participants who had previous experience in getting help reported that they got help for one time or a couple of times. 16.9% reported that the duration was less than six months, while 4.1% reported that it was between six months and a year. In addition, 5.7% of the participants reported the duration as between one and two years. Similarly, 5.7% of them reported a duration between two and four years. Finally, 3.5% of the

participants that answered this question reported that they had gotten psychological help for more than four years.

The participants that had gotten psychological help before were also asked about how beneficial that help was. 193 of the whole sample (47.5%) answered that question. 5.2% of the participants ($n = 22$) who answered this question reported that ‘It did not help at all.’ Likewise, 5.2% of the them ($n = 22$) reported that ‘It helped a little.’ 19.3% of the participants ($n = 79$) reported that ‘It was quite helpful.’ and finally, 17% reported that ($n = 70$) ‘It helped a lot.’

Participants’ views about previous help-seeking, the professional they got help from, duration and the benefit of previous help are summarized in Table 2.2.

Table 2.2

Help-Seeking Characteristics of the Participants (N = 406)

		<i>N</i>	Percentage
Previous Help Seeking	No	215	53.0
	Yes	191	47.0
	Total	406	100.0
Professional	Psychologist	142	49.3
	Psychiatrist	80	27.7
	School Consultant	44	15.2
	Counselor	15	5.2
	Other	7	2.3
	Total	288	100.0
Duration of the Help		<i>N</i>	Percentage

One/A couple of times	35	3.7
Less than six months	69	16.9
Six months-One year	17	4.1
One - Two years	24	5.7
Two - Four years	24	5.7
Four Years +	15	3.5
Total	184	100.0
<hr/>		
Benefit of the Help	<i>N</i>	Percentage
<hr/>		
It did not help at all	22	5.2
It helped a little	22	5.2
It was quite helpful	79	19.3
It helped a lot	70	17.0
Total	193	100.0
<hr/>		

2.2 PROCEDURE

Data collection took place from September 2017 to March 2018. The participants were reached through several ways such as universities, personal contacts, and an online survey. Most of the participants were recruited from two private universities, Istanbul Bilgi University and Istanbul Aydın University. Permissions were obtained from the ethics committees of the universities before beginning data collection. For the pilot study, the consent forms and questionnaire packets were given to the participants during a psychology course at Istanbul Bilgi University. More participants were reached through an online data collection

website, surveymonkey.com and also through personal contacts. It took an average of 20 minutes for participants to complete the questionnaires in the pilot study.

Data collection procedure was similar in the main part of the study. Online survey was sent to the students in two psychology courses at Istanbul Bilgi University. The students completed the survey in exchange of extra credit for these two courses. Additionally, online survey link was sent to several e-mail groups in order to recruit more participants. Most of the male participants were recruited from several courses in Istanbul Aydın University. Those were asked to fill out the questionnaire packets at the end of the courses. For the main study, completing the questionnaires was estimated to take an average of 30 minutes.

The questionnaires in the packets were presented in the same order to each participant. In pilot study, the presented order of the scales was: Informed Consent (See Appendix A), the Demographic Information Form, Beliefs about Harms and Benefits of Expressing Emotions Questionnaire, Emotional Expression Questionnaire and the Personal Style Inventory. The Emotional Expression Questionnaire was only used in the pilot of the study in order to measure the validity of revised version of the Beliefs about Emotions Scale.

In the main study, the order of the scales was as follows: Informed Consent, the Demographic Information Form, revised version of the Beliefs about Harm and Benefit of Expressing Emotions Questionnaire, Personal Style Inventory and the Thoughts About Psychotherapy Survey.

2.3 MEASURES

2.3.1 Demographic Information Form

Demographic Information Form in the main study consisted of items that include participants' gender, age, educational information, whether the participant has had any experience of seeking psychological help before, thoughts about seeking psychological help. For the participants who had previous help-seeking

experience, additional questions about the duration and quality of the help, as well as the title of the mental health professional they got help from were included in the demographic form. Demographic Information Form can be seen in Appendix B.

2.3.2 Beliefs About Harm and Benefit of Expressing Emotions Questionnaire

For measuring people's beliefs about experiencing and expressing emotions, a new measure was developed. The existing measures mostly focused on negative views. We needed a scale that would include both positive and negative views and also allow us to differentiate personal or relational factors that affect expression of anger and sadness. After a review of different existing measures, the new scale was developed through using several items from the Beliefs about Emotions Questionnaire (Manser, Cooper & Trefusis, 2011; Çakır, 2013). In order to develop new items that measured beliefs about anger and beliefs about the benefits of emotional expression in depth interviews were conducted with 4 people focusing on their beliefs about emotional expression.

The 43-item Beliefs about Emotions Questionnaire was developed by Manser, Cooper and Trefusis (2011) in order to measure the beliefs people hold toward experiencing and expressing the emotion, sadness. The scale is rated on the 5-point Likert format (1 = strongly disagree, 5 = strongly agree) consists of 6 subscales that measure the beliefs that emotions are (1) *overwhelming* and *uncontrollable*, (2) *embarrassing* and *irrational*, (3) *invalid* and *meaningless*, (4) *unnecessary*, (5) *harmful*, and (6) *contagious*. The Turkish translation of the scale was conducted by Çakır (2013). For Turkish version of the scale, findings regarding the reliability indicated that the internal consistency coefficient of Cronbach Alpha varies between 0.69 and 0.88 for the subscales (Çakır, 2013).

In accordance with the purposes of this study, 10 items about experiencing sadness were chosen from the Beliefs About Emotions Questionnaire, and 13 additional items were developed for measuring the beliefs about the expression of sadness in relationships. Furthermore, another dimension about experiencing and expressing anger was added to the scale. The items about experiencing and

expressing anger were developed based on several themes deduced from the interviews previously conducted with 4 people. Reliability and validity of this new scale and its subscales was measured in a pilot study.

The scale that was used in the pilot study included 47 items that reflect the beliefs about experiencing and expressing two emotions, *sadness* and *anger* in personal and relational domains. The items were developed to measure both the harm and the benefit of experiencing and expressing these two emotions. The measure included 8 subscales. First subscale (Cronbach Alfa=.69), *personal anger harm* consisted of 8 items that reflect the beliefs about the harm of experiencing and expressing anger for oneself. A sample item of this subscale is "Getting angry wears me out." (Öfkelenmek beni duygusal olarak yıpratır.) On the other hand, *personal anger benefit* subscale (Cronbach Alfa=.59) consisted of 4 items that measures one's belief about the personal benefit of experiencing and expressing anger. 'Expression of anger provides relief to the person.' is a sample item of this subscale. Another subscale, *relational anger harm* consisted of 7 items (Cronbach Alfa=.74) that measures the beliefs about the possible harm the anger expression could cause in relationships. One sample item is "Expression of anger could make others upset." (Öfkemi ifade etmem diğer insanları üzebilir.) In contrast, the subscale *relational anger benefit* was developed to examine the beliefs about the benefit of expressing anger in relational domain. This subscale consisted of 4 items (Cronbach Alfa=.75) (e.g. "Expressing one's anger allows the problems in relationships to be seen and solved.") (Öfkenin ifade edilmesi ilişkilerdeki sorunların görülmesini ve çözülmesini sağlar.)

Furthermore, similar themes were used in order to develop items about sadness. Personal sadness harm is a subscale that measures the common beliefs about in what ways experiencing and expressing sadness could harm one's self. A sample of the 9 items (Cronbach Alfa=.78) that constitutes this subscale is "Feeling sad means that I am weak and insufficient." (Üzgün hissetmek zayıf ve yetersiz olduğum anlamına gelir.) On the contrary, *personal sadness benefit* subscale which is consisted of 5 items (Cronbach Alfa=.70) measures one's beliefs about how beneficial is experiencing and expressing sadness to the self. (e.g. "Feeling sad

helps me to be creative.’’) is sample of this factor. As far as relational domain is concerned, two subscales, *relational sadness harm* (Cronbach Alfa=.41) and *relational sadness benefit* (Cronbach Alfa=.70) are the two subscales that measure one’ beliefs about the harm and the benefit of sadness expression may provide in relationships. The former has 4 items as ‘‘The fact that a person is always sad will keep other people away from him.’’. An example of the 5 items of the latter one is ‘‘Expressing sadness allows me to get support from others.’’ The internal consistency of the subscales was evaluated based on the pilot study. 1 item was removed that lowered the Cronbach Alpha values.

A number of composite scores were formed to utilize in the analyses. All the items concerning the harm of expressing anger were combined to form the Anger Harm Subscale ($N = 15$, Cronbach’s Alpha = .82). Similarly all the items regarding the Benefit of expressing Anger were combined to form the Anger Benefit Subscale ($N = 8$, Cronbach’s Alpha = .79). The same procedure was used to form the Sadness Benefit ($N = 10$, Cronbach’s Alpha = .80) and Sadness Harm subscales ($N = 13$, Cronbach’s Alpha = .81). Finally items regarding the relational harm of both sadness and anger were compared to form the Relational Harm Subscale ($N = 11$, Cronbach’s Alpha = .73). The Relational Benefit ($N = 9$, Cronbach’s Alpha = .77), Personal Harm ($N = 17$, Cronbach’s Alpha = .81) and Personal Benefit Subscales ($N = 9$, Cronbach’s Alpha = .67) were formed in the same way. These were the subscales that were used in the analyses and the results of the internal consistency analysis showed that this scale’s composite factors had acceptable reliability values.

In order to evaluate the validity of the Beliefs About Harm and Benefit of Expressing Emotions Questionnaire, a series of Pearson correlations between its subscales and the Emotional Expression Questionnaire were calculated in a pilot study, recruiting 76 college students. Emotional Expression Questionnaire (King & Emmons, 1991) is self-report inventory that measures general emotional expression tendency. It consists 16 items that are rated on the 7-point Likert type (1 = absolutely disagree, 7 = strongly agree). High scores on this scale indicate one’s willingness of emotional expression, while lower scores show the reluctance to

express emotions. The reliability and validity analysis of the Turkish translation of this scale was conducted by Kuzucu (2006), the Cronbach Alpha ($\alpha = .85$) and test-retest values ($n = 96, r = .85$) were satisfactory. According to the correlational analysis, Sadness Benefit composite was positively related to the total score of Emotional Expression Questionnaire, $r(76) = .43, p < .05$. Moreover, positive correlation was found between Personal Benefit composite and Emotional Expression Questionnaire $r(76) = .25, p < .05$, as well as Relational Benefit composite and the Emotional Expression Questionnaire $r(75) = .43, p < .05$. Finally, General Benefit composite was also positively related to the total score of Emotional Expression Questionnaire, $r(75) = .40, p < .05$. These findings provide a validity support to the new scale in terms of measuring the positive and negative attitudes of the people towards emotional expression.

The Beliefs about Harms and Benefits of Expressing Emotions Questionnaire can be seen in Appendix C.

2.3.3 Personal Style Inventory

Personal Style Inventory was used in order to measure sociotropy and autonomy. The scale was developed (Robins, Ladd, Welkowitz, Blaney, Diaz & Kutcher, 1994) for examining people's relational concerns (e.g. "I often put other people's needs before my own.") and concerns about maintaining autonomy instead of prioritizing others (e.g. "I am easily bothered by other people making demands of me"). 48-item scale is a 6-point rating scale (1=Strongly disagree, 6=Strongly agree). The internal consistency values of both Sociotropy (Cronbach's alpha=.90) and Autonomy (Cronbach's alpha=.86) scales of Personal Style Inventory were reported to be high. Each factor of the scale has three subscales. The subscales of Sociotropy are Concern What Others Think, Dependency and Pleasing Others and the subscales of Autonomy are Perfectionism/Self-criticism, Need for Control and Defensive Separation. In addition, small gender differences in terms of two factors (Sociotropy and Autonomy) were reported by the authors, as women's scores were higher on sociotropy.

For the present study, the Personal Style Inventory was translated to Turkish by three clinical psychologists who were native speakers of Turkish and were competent in English language. The variations in translations were discussed by the researchers and the scale found its final version after negotiations in wording of controversial items. Similar with the previous findings, the factors of Sociotropy (Cronbach's $\alpha=.86$) and Autonomy (Cronbach's $\alpha=.80$) showed good measures of internal consistency. However, the Cronbach's alpha values of the subscales of Sociotropy and Autonomy were just acceptable and low. The values of Sociotropy subscales were .72 for Concern What Others Think, .71 for Dependency, .77 for Pleasing Others. Moreover, the values for Autonomy subscales were .44 for Perfectionism/Self-criticism, .68 for Need for Control, .73 for Defensive Separation. Therefore in this study only the major factors of Sociotropy and Autonomy were utilized in the analyses.

The items of Personal Style Inventory can be seen in Appendix D.

2.3.4 Thoughts About Psychotherapy Survey

The 19-item survey was developed by Kushner and Sher (1989) to measure individuals' fear of applying for psychotherapy. The scale is consisted of three subscales and the items are rated in a 5-point Likert type format (1 = Does not concern me at all, 5 = Concerns me a lot). One factor, *Therapist's Responsiveness* includes 7 items that assess one's concerns about the therapist's responses (e. g. "Whether I'll be treated as a person in therapy"). Another subscale, *Image Concerns*, measures the one's concerns about the therapist's negative impressions and evaluations about the client (e. g. "Whether the therapist will think I'm more disturbed than I am"). Finally, *Coercion Concerns* is the factor that assess one's fear of being pushed by the therapist to think or to do things that he doesn't want to do (e. g. "Whether I will end up changing the way I think or feel about the things and the world in general").

Topkaya (2011) conducted the reliability and validity analysis of the scale in Turkey (Cronbach Alfa=.91). Similar with the previous findings, the internal

consistency analysis of this scale was adequate in the present study. The Cronbach's alpha values are .89 for the whole scale, .86 for the Therapist's Responsiveness, .80 for Coercion Concerns and .78 for the Image Concerns.

Items of the Thoughts About Psychotherapy Survey are presented in Appendix E.

RESULTS

3.1 PRELIMINARY DESCRIPTIVE ANALYSES

The relationship between the study variables and demographic variables were examined with a series of descriptive analyses conducted. The predictor variables of the study were (1) beliefs about emotions, anger and sadness, (2) personal styles, sociotropy and autonomy. The dependent variable of the study was the attitudes toward psychotherapy. Based on the literature, gender was considered as a possible predictor, additionally.

Descriptive analysis for the previous help-seeking experience, the analyses of the subscales and composites of the Beliefs About Harm and Benefit of Expressing Emotions, as well as analyses by gender were reported in this section. Moreover, descriptive analysis of the Personal Style Inventory (PSI) and the Thoughts About Psychotherapy Survey (TAPS) and analyses of these scales by gender can be seen in the following sections. Finally, additional analyses of the relationship between the beliefs about harm and benefit of expressing emotions and thoughts about psychotherapy can be seen in this section.

3.1.1 Previous Help-Seeking Experience by Gender

According to the results, women reported to have more previous experience in help-seeking than men $t(406) = 6.2, p < .05$. The results of a one-tailed independent group t-test indicated a significant difference between the mean scores of women ($M = 0.59, SD = 0.49$), and men ($M = 0.29, SD = 0.45$).

3.1.2 Descriptives of the Thoughts About Psychological Help-Seeking

Participants were asked about their thoughts about psychological help-seeking. According to the results, a significant number of the participants (19%) thought that they could handle their problems without getting help. Following that,

15.3% of the participants ($n = 62$) reported that they had never needed to get psychological help.

Participants thoughts about getting psychological help can be seen in Table 3.1.

Table 3.1 Thoughts About Seeking Psychological Help (N = 406)

	<i>N</i>	Percentage
I thought about getting psychological help but I did not apply for it because of thinking that I could handle my own problems	77	19.2
I have never needed to get psychological help	62	15.3
I thought about getting psychological help but I did not apply for it because I believed that the problems will be solved by the time.	55	13.5
I thought about getting psychological help but it did not seem possible due to financial reasons	49	12.1
I have not thought about it yet, but I might want to get psychological help in the future	42	10.3
I thought about getting psychological help but I could not find time to apply for it	36	8.9

I thought about getting psychological help but I did not apply because I do not believe it could be useful	27	6.7
I thought about getting psychological help, but I gave up because I did not think that I would open up my problems to an expert	16	3.9
I thought about getting psychological help, but I gave up because of my concerns about the opinions of others about me getting help	5	1.2

3.1.3 Descriptives of the Beliefs About Harm and Benefit of Expressing Emotions Questionnaire

Descriptive statistics for the subscales of the Beliefs About Harm and Benefit of Expressing Emotions Questionnaire that were used in the analyses can be seen in Table 3.2.

Table 3.2

Descriptive Statistics for the Composites of the Beliefs About Harm and Benefit of Expressing Emotions Questionnaire (N= 406)

	<i>M</i>	<i>SD</i>
Anger Harm Total	2.84	0.59
Anger Benefit Total	3.41	0.67
Sadness Harm Total	2.58	0.63
Sadness Benefit Total	3.55	0.65
Personal Harm Total	2.69	0.56
Personal Benefit Total	3.35	0.57

Relational Harm Total	2.76	0.57
Relational Benefit Total	3.62	0.62
General Harm	2.72	0.53
General Benefit	3.49	0.54

3.1.4 Descriptives of the Personal Style Inventory

Descriptive statistics for the of the Personal Style Inventory can be seen in Table 3.3.

Table 3.3

Descriptive Statistics for the Personal Style Inventory (N= 406)

	Min	Max	<i>M</i>	<i>SD</i>
Sociotropy	1.88	5.5	3.77	.67
Autonomy	1.71	5.5	3.92	.58

3.1.5 Descriptives of the Thoughts About Psychotherapy Survey

Descriptive statistics for the subscales of the Thoughts about Psychotherapy Survey can be seen in Table 3.4.

Table 3.4*Descriptive Statistics for the Thoughts About Psychotherapy Survey (N= 406)*

	Min	Max	<i>M</i>	<i>SD</i>
Therapist's Responsiveness	1	5	3.23	1.1
Image Concerns	1	5	2.29	0.9
Coercion Concerns	1	5	2.44	1.0
Total	1	5	2.68	0.8

3.2 HYPOTHESES TESTING

3.2.1 Test of Hypothesis 1

Hypothesis one stated that there would be significant relationships among the beliefs about the harm and benefit of experiencing and expressing emotions (sadness and anger) and the attitudes toward utilizing psychotherapy services.

Hypothesis 1a stated that people who hold stronger beliefs about the harm of emotions (sadness and anger) were expected to report higher levels of negative attitudes toward psychotherapy. Thus, it was expected that the scores of the composites Anger Harm Total, Sadness Harm Total and General Harm Total would have positive correlation with the mean score of the Thoughts About Psychotherapy Survey.

Hypothesis 1b stated that people who hold stronger beliefs about the benefit of emotions (sadness and anger) were expected to report lower levels of negative attitudes toward psychotherapy. Thus, it was expected that the scores of the composites Anger Benefit Total, Sadness Benefit Total and General Benefit Total would have positive correlation with the mean score of the Thoughts About Psychotherapy Survey.

First of all, multiple correlations were calculated among all the subscales, as well as the composites of the Beliefs About Harm and Benefit of Expressing

Emotions Questionnaire and the Thoughts About Psychotherapy Survey. The results are displayed in Table 3.5.

Table 3.5*Correlations Between the Beliefs About Emotions and Thoughts About Psychotherapy*

	1	2	3	4	5	6	7	8	9	10	11
1. Anger Harm	-										
2. Anger Benefit	-.25**	-									
3. Sadness Harm	.51**	-.07	-								
4. Sadness Benefit	-.16**	.37**	-.39**	-							
5. Personal Harm	.80**	-.17**	.86**	-.32**	-						
6. Personal Benefit	-.14**	.69**	-.17**	.79**	-.20**	-					
7. Relational Harm	.84**	-.18**	.70**	-.25**	.72**	-.13**	-				
8. Relational Benefit	-.30**	.74**	-.36**	.77**	-.35**	.66**	-.35**	-			
9. General Harm	.88**	-.19**	.85**	-.31**	.95**	-.18**	.89**	-.38**	-		
10. General Benefit	-.24**	.79**	-.30**	.86**	-.31**	.90**	-.27**	.92**	-.31**	-	
11. Therapy Attitudes	.32**	-.09	.30**	-.23**	.35**	-.15**	.32**	-.22**	.36**	-.20**	-

*p < .05. ** p < .01. *** p < .001.

In order to evaluate which of the subscales of the Beliefs About Harm and Benefit of Expressing Emotions Questionnaire would predict the attitudes toward psychotherapy better regression analyses were conducted. For examining the relationship between the beliefs about emotions and attitudes toward psychotherapy, conducting two different regression analyses was appropriate as high correlations were found between some composite scores of the Beliefs about Harm and Benefit of Expressing Emotions Questionnaire. For the first analysis, Anger Harm, Anger Benefit, Sadness Harm, Sadness Benefit composites were entered into stepwise multiple regression. All of these composites included items that reflect the beliefs about emotions in both personal and relational domains. At step one of the analysis, the beliefs about the harm of anger (Anger Harm Total) entered into the equation ($B = .32$). In the second step, benefit of sadness (Sadness Benefit Total) entered into the regression equation and was significantly related to the attitudes toward psychotherapy ($B = -.18$). In the third step, the beliefs about the harm of sadness (Sadness Harm Total) entered into the equation. According to the analysis, regression equation was significant $F(2, 403) = 23.910, p < .000$, with an R^2 of .15, indicating that 15% of the variance of the negative attitudes toward psychotherapy can be accounted for by the linear combination of Anger Harm, Sadness Benefit and Sadness Harm Total composite scores. Stronger views on the personal and relational harm of expressing and experiencing anger predicted more negative attitudes towards psychotherapy. Another significant predictor of negative attitudes toward therapy was the stronger beliefs about the both personal and relational harm of experiencing and expressing sadness. On the other hand, views on the benefits of expressing sadness was inversely correlated to negative attitudes towards psychotherapy. The composite score of Anger Benefit did not enter into the equation at step 2 and step 3 of the analysis.

The summary of multiple regression analysis can be seen in Table 3.6.

Table 3.6*Predictors of the Negative Attitudes Toward Psychotherapy*

Variable	Model 1			Model 2			Model 3		
	<i>B</i>	<i>SE B</i>	β	<i>B</i>	<i>SE B</i>	β	<i>B</i>	<i>SE B</i>	β
Anger Harm	0.60	0.08	.32**	.54	.08	.29**	.43	.09	.23**
Sadness Benefit				-.46	.11	-.18**	-.36	.12	-.14*
Sadness Harm							.26	.11	.13*
R ²		.10			.14			.15	
F for change in R ²		48.29**			32.89**			23.91**	

Note. $N = 406$. CI = confidence interval. * $p < .05$. ** $p < .01$.

In order to conduct a second regression analysis, Personal Harm, Personal Benefit, Relational Harm and Relational Benefit composites were entered into stepwise multiple regression. At step one of the analysis, the beliefs about the harm of two emotions in personal domain (Personal Harm Total) entered into the equation ($B = .35$). In the second step, the beliefs about the benefit of the two emotions in relational domain (Relational Benefit Total) entered into the regression equation and was significantly related to the attitudes toward psychotherapy ($B = -.10$). According to the analysis, regression equation was significant $F(2, 403) = 31.571, p < .000$, with an R^2 of .13, indicating that 13% of the variance of the negative attitudes toward psychotherapy can be accounted for by the linear combination of Personal Harm and Relational Benefit Total composite scores. Stronger views on the personal harm of expressing and experiencing the two emotions predicted more negative attitudes towards psychotherapy. On the other hand, views on the benefits of expressing anger and sadness in relationships was inversely correlated to negative attitudes towards psychotherapy. Other composite scores did not enter into the equation at step 2 of the analysis.

The summary of multiple regression analysis can be seen in Table 3.7.

Table 3.7

Additional Predictors of the Negative Attitudes Toward Psychotherapy

Variable	Model 1			Model 2		
	B	$SE B$	β	B	$SE B$	β
Personal Harm	0.59	0.07	.35**	.53	0.08	.31**
Relational Benefit				-.31	0.14	-.10*
R^2		.12			.13	
F for change in R^2		57.87**			31.57**	

Note. $N = 406$. * $p < .05$. ** $p < .01$

3.2.2 Test of Hypothesis 2

Hypothesis two stated that there would be significant relationships among the personal and relational dimensions of beliefs about experiencing and expressing emotions (sadness and anger) and the personal styles of sociotropy and autonomy.

Hypothesis 2a stated that people who hold beliefs about the harm of emotions (sadness and anger) in the relational domain were expected to report more of a sociotropic style. On the other hand, Hypothesis 2b stated that people who hold beliefs about the harm of emotions (sadness and anger) in the personal domain were expected to report more of an autonomous personal style.

To test these hypotheses, overall Relational Harm Total composite score was created through the addition of the Relational Anger Harm and Relational Sadness Harm subscales of the Beliefs About Harm and Benefit of Expressing Emotions Questionnaire. Similarly, Personal Harm Total composite score was created through the addition of the Personal Anger Harm and Personal Sadness Harm subscales of the questionnaire. Bivariate correlations were computed among the composites of the Personal Harm, Relational Harm, Personal Benefit, Relational Benefit, Anger Harm, Anger Benefit, Sadness Harm and Sadness Benefit Total, and the sociotropy-autonomy scores as measured by the Personal Style Inventory.

According to analysis, both relational and personal harm scores were positively correlated with both sociotropy and autonomy. Although the correlations between relational harm beliefs and sociotropy ($r = .31$), as well as personal harm beliefs and autonomy ($r = .33$) were the largest, the differences were not significant to distinguish the personal and relational domains in terms of the beliefs about emotions. No other correlations were significant for understanding the relationship between the beliefs about emotions and personal styles.

Correlations between the composite scores of the beliefs about emotions and sociotropy-autonomy are presented in Table 3.8. Additionally, the summary of the significant correlations between these variables can be seen in Table 3.9.

Table 3.8*Correlations Between the Beliefs About Emotions and Sociotropy-Autonomy*

	Sociotropy	Autonomy
Relational Harm	.31**	.29**
Relational Benefit	.08	.04
Personal Harm	.29**	.33**
Personal Benefit	.07	.15**
Anger Harm	.27**	.26**
Anger Benefit	.10*	.22**
Sadness Harm	.28**	.34**
Sadness Benefit	.04	-.03

Note. * $p < .05$. ** $p < .01$. *** $p < .001$.

Table 3.9*Summary of the Correlations between the Beliefs about Emotions and Personal Styles*

	Sociotropy	Autonomy
Relational Harm	.31**	.29**
Personal Harm	.29**	.33**

* $p < .05$. ** $p < .01$. *** $p < .001$.

3.3 ADDITIONAL ANALYSES

3.3.1 Analyses Related to the Attitudes Toward Psychotherapy

3.3.1.1 Previous Experience in Getting Psychological Help and Attitudes Toward Psychotherapy

In order to evaluate the relationship between participants' previous experience in getting psychological help and their attitudes toward psychotherapy, a one-tailed independent groups t-test was conducted. The results indicated a significant difference between the attitudes of the participants who reported previous experience in getting help and who did not $t(406) = 2.78, p < .05$. The mean score of the participants who reported to have previous experience in getting help was 48.54 ($M = 48.54, SD = 16.09$), while the score of the participants who did not have experience in getting psychological help was 53.03 ($M = 53.03, SD = 16.31$). According to these findings, there was an inverse relationship between the previous experience and negative attitudes toward psychotherapy. The participants who reported no experience in getting help from mental health professionals reported more negative attitudes toward psychotherapy.

The summary of t-test results is presented in Table 3.10.

Table 3.10

Group Statistics for the Negative Attitudes Toward Psychotherapy

	Previous Experience	<i>M</i>	<i>SD</i>
Negative Attitudes	No	53.03*	16.31
	Yes	48.54*	16.09

Note. (*) shows significance at $p > 0.05$

3.3.1.2 Correlational Analysis of the Personal Styles and Attitudes Toward Psychotherapy

In order to evaluate the association among the personal styles, Sociotropy/Autonomy and attitudes toward psychotherapy, a Pearson correlational analysis was conducted. The participants' scores on sociotropy were positively related to their negative attitudes toward psychotherapy $r(406) = .24, p < .05$. Similarly, the participants' scores on autonomy were positively related to their negative attitudes toward psychotherapy $r(406) = .22, p < .05$. These findings indicated that personality styles of sociotropy and autonomy did not differentiate the attitudes toward psychotherapy, higher points in both orientations were associated with negative attitudes towards therapy.

3.3.1.3 Variance Analysis of Demographic Factors and Attitudes Toward Psychotherapy

An analysis of variance was conducted to determine whether the previous experience in getting psychological help and the duration of previous help influenced the participants' attitudes toward psychotherapy. Results indicated no main effect for the duration of previous psychological help. $F(5,178) = 1.973, p < .05$. The mean scores of the attitudes toward psychotherapy for the reported durations of previous help as 'one time or a couple of times', 'less than six months', 'between six months and a year', 'between one and two years', 'between two and four years' and 'more than four years' were respectively, $M = 46.91, SD = 1.58, M = 48.30, M = 45.05, M = 52.45, M = 51.33,$ and $M = 40.20$. Also, results did not indicate a main effect for previous experience in getting psychological help, $F(1,175) = 3.742, p < .05$. The mean score for the participants who reported previous experience in getting help was $M = 47.73$, while the mean score for the participants who did not report previous experience in getting help was $M = 58$. Finally, no main effect for the interaction of the previous experience in getting

psychological help and the duration of the previous help was indicated by the results, $F(2,175) = 1.076, p < .05$.

3.3.2 Analyses by Gender

3.3.2.1 Analysis of the Beliefs About Emotions Questionnaire

No hypothesis about gender has been proposed in this study. However, as gender has been considered to be an important factor in literature, additional analyses were conducted in order to understand its possible effect on the variables of this study. Results of one-way analysis of variance indicated that gender was a significant factor that affected beliefs about the personal benefit of expressing sadness, $F(1, 404) = 6.2, p < .05$. The mean score of women given to Personal Sadness Benefit was higher ($M = 17.41, SD = 3.49$) than men's score ($M = 16.47, SD = 4.01$). Similarly, women's beliefs about the benefit of experiencing and expressing sadness in relationships were significantly higher than men, $F(1, 404) = 22.09, p < .05$. Women's Mean score on Relational Sadness Benefit was $M = 19.15, SD = 3.12$; Men's Mean Score on Relational Sadness Benefit $M = 17.49, SD = 3.99$.

Another significant effect of gender was on the beliefs about the benefit of experiencing and expressing anger in relationships, $F(1, 404) = 23, p < .05$. Women endorsed relational benefit of anger ($M = 14.75, SD = 03.04$) to a higher degree than men ($M = 13.24, SD = 3.17$). On the other hand, men ($M = 20.5, SD = 5.17$) reported stronger beliefs about the harm of expressing anger in relationships compared to women's beliefs ($M = 18.7, SD = 4.39$), $F(1, 404) = 15.63, p < .05$. Finally, men's score ($M = 11.24, SD = 2.75$) was also significantly high in Relational Sadness Harm sub-factors compared to women ($M = 10.68, SD = 2.43$), $F(1, 404) = 4.71, p < .05$.

Results of one-way analysis of variance of all subscales can be seen in Table 3.11.

Table 3.11

Variance Analysis of Subscales of the Beliefs About Harm and Benefit of Emotions Questionnaire

		<i>df</i>	<i>SS</i>	<i>MS</i>	<i>F</i>	<i>p</i>
RAH	Between groups	1	349.32	349.32	15.63*	.000
	Within groups	404	9025.87	22.34		
	Total	405	9375.2			
RAB	Between groups	1	221.12	221.12	23.00*	.000
	Within groups	404	3883.87	9.61		
	Total	405	4104.99			
RSB	Between groups	1	270.74	270.74	22.09*	.000
	Within groups	404	4950.55	12.25		
	Total	405	5221.3			
PSB	Between groups	1	86.95	86.95	6.29*	.013
	Within groups	404	5581.63	13.81		
	Total	405	5668.58			
RSH	Between groups	1	31.13	31.13	4.71*	.031
	Within groups	404	2670.84	6.61		
	Total	405	2701.98			
PAB	Between groups	1	26.82	26.82	3.25	.072
	Within groups	404	3326.40	8.23		
	Total	405	3353.23			

PSH	Between groups	1	128.83	128.83	3.18	.075
	Within groups	404	16325.16	40.40		
	Total	405	16453.99			
PAH	Between groups	1	74.89	74.89	2.92	.088
	Within groups	404	10330.65	25.57		
	Total	405	10405.54			

Note. (*) shows significance at $p < 0.05$.

RAH: Relational Anger Harm

RAB: Relational Anger Benefit

RSB: Relational Sadness Benefit

PSB: Personal Sadness Benefit

RSH: Relational Sadness Harm

PAB: Personal Anger Benefit

PSH: Personal Sadness Harm

PAH: Personal Anger Harm

Overall, women seem to have stronger beliefs about the benefit of expressing both sadness and anger in comparison to men. On the other hand, men perceive the harm of expressing of both anger and sadness more significantly. The difference is particularly large with regard to the potential harm of expressing anger. The relational or personal domains did not appear to have a significant effect across gender.

3.3.2.2 Analysis of the Personal Style Inventory

A one-way analysis of variance was conducted to examine the group differences between men and women in terms of sociotropy and autonomy. The results indicated that women were stronger on the sociotropy dimension ($F(1, 404) = 6.5, p < .05$). The mean score of women was 92.2, ($SD = 15.75$), while the mean sociotropy score for men was 88.07, ($SD = 16.31$). On the contrary, Autonomy scale scores of men and women did not differ from one another ($F(1, 404) = 2.5, p$

< .05.). According to results, men and women seem to hold an autonomous style similarly. However, women also hold more sociotropic tendencies compared to men.

ANOVA analysis of Personal Style Inventory is presented at Table 3.12.

Table 3.12

Variance Analysis of the Personal Style Inventory

		<i>df</i>	<i>SS</i>	<i>MS</i>	<i>F</i>	<i>p</i>
Sociotropy	Between groups	1	1674.44	1674.44	6.55*	.011
	Within groups	404	103196.75	255.43		
	Total	405	104871.2			
Autonomy	Between groups	1	498.46	498.46	2.55	.11
	Within groups	404	78871.23	195.22		
	Total	405	79369.7			

Note. (*) shows significance at $p < 0.05$

3.3.2.3 Analysis of the Thoughts about Psychotherapy Survey

Another variance analysis was conducted to examine whether women and men differed in their attitudes toward psychotherapy. The results of ANOVA indicated that gender had a significant effect on the thoughts about psychotherapy, $F(1, 404) = .03, p < .05$. Descriptive analysis determined that men ($M = 52.97, SD = 17.81$) had more negative attitudes toward psychotherapy compared to women ($M = 49.52, SD = 15.13$). A large extent of this variance was due to the difference in the subscale regarding concerns about the therapist's negative impressions and evaluations about the client. The score of men showed the most difference in *Image concerns* subscale, $F(1, 404) = .01, p < .05$.

The results of ANOVA can be seen in Table 3.13.

Table 3.13*Variance Analysis of the Subscales of TAPS*

		<i>df</i>	<i>SS</i>	<i>MS</i>	<i>F</i>	<i>p</i>
Therapist's Responsiveness	Between groups	1	63.95	63.95	1.07	.3
	Within groups	404	24114.09	59.68		
	Total	405	24178.04			
Image Concerns	Between groups	1	260.64	260.64	6.13*	.01
	Within groups	404	17157.33	42.46		
	Total	405	17417.98			
Coercion Concerns	Between groups	1	100.61	100.61	3.61	.05
	Within groups	404	11243.42	27.83		
	Total	405	11344.03			
Total Scale	Between groups	1	1167.75	1167.75	4.4*	.03
	Within groups	404	107028.02	264.92		
	Total	405	108195.78			

Note. (*) shows significance at $p < 0.05$

DISCUSSION

The present study examined the relationship between young people's beliefs about expressing and experiencing two emotions (sadness and anger) and their attitudes towards utilizing psychotherapy services in a sample of Turkish young adults. It is important to note that, the results of this study are not universal. The beliefs about emotions is a theoretical construct that has been studied by few studies in help-seeking literature. Most of those studies have proposed the link between the tendency to express emotions and attitudes towards seeking help for mental health problems. However, the beliefs about expressing and experiencing negative emotions have not been investigated much, especially in association with the attitudes toward psychotherapy. Thus, the findings of this study are suggested to be replicated in further researches, since the study is the first to examine the beliefs about negative emotions and attitudes towards psychotherapy in Turkish young adults.

4.1 Help-seeking Prevalence

Findings with regard to the participants' willingness to seek psychological help were consistent with previous findings in Turkey. In this study, a significant number of the participants (19%) reported that they had not sought help before. Consistent with this, the studies of Erkan, Özbay, Çankaya and Terzi (2012), as well as Topkaya and Meydan (2013), help-seeking prevalence was low in Turkish young adults. Also, in this study, previous experience in seeking psychological help was found to be related to people's attitudes toward psychotherapy. Participants who reported not having previous experience reported more negative attitudes toward therapy. Those results may be reflecting some kind of familiarity effect. Being familiar with the help sources may be decreasing or eliminating the effect of people's anxieties about the setting and mental health professionals, thus providing more positive attitudes toward seeking help at the second time. However, other authors reported no significant effect of previous experience on the attitudes toward

seeking psychological help (Koydemir-Özden & Erel, 2010). Thus more research is required to understand the relationship between these variables.

Most reported reason of the unwillingness to seek help was the participants' belief that they could handle the problems without getting any help (19.2%). Following that, 15.3% of the participants reported that they never got psychological help before. Moreover, according to the reports of 13.5% of participants, the reason of their unwillingness to seek help was the belief that the problems would be solved by time. Koydemir-Özden and Erel (2010) reported similar results in Turkey. These authors reported that the most significant barriers to seek psychological help were people's perception of their difficulties as manageable without getting any help and their preference not to disclose themselves to others. In addition, the participants preferred to seek professional help only when they perceived their problems as being of great importance.

According to the study of Koydemir and Demir (2005) university students were most likely to seek help from a friend for their personal problems or they simply tried to solve these kinds of problems by themselves. However, they preferred to see a counselor for other problem areas they perceive to be more difficult, such as pessimism and shyness. Similarly, for social, academic, sexual, and family problems they preferred to seek help from other sources except from counselors. All of these consistent findings can be related to the people's subtle beliefs that mental health sources can only be utilized when one perceives the psychological problems as highly difficult, or maybe unmanageable and uncontrollable. Eliminating or controlling symptoms is among the main purposes of interventions in certain kind of psychotherapy approaches like cognitive-behavioral psychotherapy. However, other approaches like psychodynamic, humanistic and existential psychotherapies do not prioritize working on the symptoms but understanding the psychological problems via understanding the unconscious. This can be related to the Turkish people's lack of knowledge about the purpose of those kind of psychotherapy modalities. People may be perceiving therapist as doctors and thus they expect them to treat symptoms and provide quick

solutions. However, only a few studies investigated people's beliefs about psychotherapy and their expectations from a psychotherapy process as well as the therapist.

Lüleci, Soylu and Canbulat (2015) developed a scale to measure people's expectations about psychotherapy. According to the results of the factor analysis, self-disclosure and acceptance, guidance, promotiveness and facilitation were reported as the most prominent themes. Moreover, Türküm, Kızıldaş & Sarıyer (2016) reported that university students' most common expectations from mental health professionals were about the secrecy of their personal information, being listened carefully and understood well by the counsellor, being led about their important life decisions, and developing a sincere relationship with the counselor. It is important to note that all of these beliefs are of a relational nature and no expectations were reported that reflect an autonomous attribute. The clients apply for psychological help sources having certain expectations about the process and outcome. Thus those expectations effect their decisions to seek help and continuing to get help. Moreover, effectiveness of the provided psychological help is also related to clients' expectations (Tinsley, Workman & Kass, 1980). Vogel, Wester, Wei and Boysen (2005) reported anticipating negative treatment outcomes as predictors of negative attitudes towards utilizing psychotherapy and unwillingness to seek psychological help.

According to the previous studies and findings of the current study, it seems important to understand more clearly what people know about psychotherapy as well as what they expect from it. These factors may also have an impact on the link between the beliefs about emotions and attitudes toward psychotherapy. For instance, people's relational expectations may also be related to their relational beliefs about emotional expression. People who expect developing a sincere relationship with the counselor may avoid expressing their anger.

4.2 The Effect of Gender

In the present study, men reported more negative attitudes toward psychotherapy, apart from the effect of the beliefs about emotions and personal styles. In addition, women reported to have more previous experience in help-seeking than men. In literature, gender and gender roles were among the most predictive factors of the attitudes toward help-seeking as well as the willingness to seek help (Fischer & Turner, 1970). Koydemir-Özden and Erel (2010) reported that being male was a predictor of more negative attitudes toward seeking psychological help. Men's reluctance to utilize mental health services may be related to their perception of stigma. According to the research by Topkaya (2014), men experienced both self-stigma and public stigma more than women. Seyfi and colleagues (2013) reported similar findings and suggested that men are commonly expected to be more strong and self-sufficient compared to women, as well to be in control of their emotions. Depending on others by seeking help does not seem to be suitable with traditional gender roles given to men in Turkey.

According to the traditional gender roles in Turkish society, girls are expected to be more emotional, sensitive to others' needs and more passive in decision making (Kalkan & Odacı, 2005). While the gender attributions make men vulnerable to aggressive and instinctual behavior, as well as acting more logical and having the ability to easily overcome problems. Masculinity and femininity roles examined as possible determiners of people's attitudes toward seeking psychological help. Kalkan and Odacı (2005) reported that masculinity role was in correlation with negative attitudes toward seeking help, while no relationship was reported between femininity role and negative attitudes.

In the present study, gender was also a determining factor with regard to people's beliefs about emotions. The results indicated that gender affected the beliefs about the relational harm and benefit of expressing emotions. Women reported stronger beliefs about the benefit of experiencing and expressing sadness in relationships compared to men. Similarly, women reported stronger beliefs about

the benefit of experiencing and expressing anger in relationships, while men endorsed stronger beliefs about the harm of expressing anger in relationships. Moreover, men also reported stronger beliefs that expressing sadness would harm the relationships. However, the relational or personal domains did not appear to have a significant effect across gender. In general, women seem to have stronger beliefs about the benefit of expressing both sadness and anger in comparison to men. On the other hand, men perceive the harm of expressing of both anger and sadness more significantly. Potential harm of expressing anger seem to make the most significant difference between men and women.

Gender difference in emotional expression are well documented in previous studies. This difference was mostly prescribed by cultural stereotypes and display rules related to gender. According to previous studies, sadness, fear, anxiety, as well as happiness and empathy were among the emotions girls and women tend to express more frequently than boys and men (Brody & Hall, 1993). Garside and Klimes-Dougan (2002) reported that girls were rewarded as a consequence of sadness expression, while boys were punished. Moreover, boys were reported to be encouraged to express more anger than girls. Specific social functions of each emotion seem to be interacting with culturally accepted gender stereotypes of masculinity and femininity. For instance, anger expression is viewed more masculine as it socially provides power and dominance over the others. However, sadness expression commonly evokes empathy in others and is viewed more feminine (Garside & Klimes-Dougan, 2002).

Studies in different cultures have raised many conclusions about gender stereotypes. For instance, North American women were reported to be more intense in emotional experiences and more expressive than men (Grossman & Wood, 1993; Robinson & Johnson, 1997). Emotion-specific stereotypes were also reported by other authors. Women were reported to experience and express happiness, sadness, fear, shame, embarrassment, and guilt, while the expression of anger, pride and contempt were more common in men (Plant, Hyde, Keltner, & Devine, 2000). Fabes and Martin (1991) examined the beliefs people hold about gender stereotypes

concerning 25 different emotions. The results demonstrated that the stereotypic beliefs about emotional experiences of men and women were similar, however, women were expected to express love, fear and sadness more often than men while men were expected to express anger more frequently. All of these findings are consistent with 'display rules' concept that explains more social underpinnings of emotional processes. The rules that come from socialization processes basically determine how people express their emotions. According to basic display rules, sadness is considered to be a female-stereotyped emotion, whereas, anger is conceptualized as male-stereotyped emotion (Ekman & Friesen, 1969).

Research about children's socialization processes suggest that children learn to label and express their emotions in a gender-stereotyped manner. Many of the studies that examined parents' practices to socialize children have showed that girls are more encouraged to express their emotions generally, in comparison to boys (Brody, 1999; Eisenberg, Cumberland & Spinrad, 1998). Similarly, Turkish mothers' and fathers' emotion socialization practices were reported different from each other. According to findings, mothers encouraged the expression of negative emotions more compared to fathers. Moreover, both negative and positive emotions were valued more by mothers. Parents' who value negative emotions (fear, anger, sadness) were reported to hold more supportive strategies like encouraging emotional expression in children's socialization practices. Child's gender was also reported as a significant factor in terms of the two negative emotions, anger and sadness. Boys were reported to be encouraged more than girls in the expression of those emotions (Has, 2016). According to these findings, men were expected to be more open to express their emotions in comparison to women. Inconsistent with this, the results of the current study suggest the opposite, as women reported to hold more beliefs about the benefit of expressing both anger and sadness. This may be related to a developmental change in parents' expectations about children's emotions. Research have proven that as the children grow older, their adaptation to cultural display rules become more important according to the parents (Jones, Eisenberg, Fabes & MacKinno, 2002). This possible change is meaningful considering that social and personal consequences of expressing emotions may be

more dramatic in adulthood compared to childhood. For instance, a child's expression of sadness and anger may result in adults' interest and consolation, whereas, it may cause negative relational consequences that depend on the culturally accepted display rules for adults. Yet, these relations are in speculative nature, and it is not clear why women were found to be more open to express their emotions even if this does not seem consistent with previous findings and cultural stereotypes related to gender in Turkey. Thus, more research is needed to understand more about men's and women's beliefs about emotional expression, especially the reasons that support women's tendencies to express their emotions more than men.

There is little research that investigates the relationship between gender stereotypes and emotional expression in Turkey. Kuyumcu (2012) investigated psychological well-being, emotional expression as well as emotional awareness, comparing Turkish and English university students with regard to those factors. Culture was reported to be a significant factor in terms of emotions and well-being. Turkish participants had significantly lower scores on all of these factors. However, their emotional awareness and emotional expression tendencies did not differ in terms of gender. The author suggested that traditional expectations in regard to gender roles may have been changed into a more egalitarian view that rules out the perceived stereotypic differences between men and women in Turkey. On the other hand, men were reported to show more aggressive behaviors as a consequence of anger, whereas women reported to have more passive-aggressive reactions in situations that evoke anger. The findings were as compatible with existing literature about gender stereotypes (Bostancı, Çoban, Tekin & Özen, 2006). Moreover, Elkin and Karadağlı (2016) reported that gender was a significant factor in Turkish university students' anger expression styles. Men was reported having more tendency to repress the thoughts that provoke anger compared to women. In contrast, men also reported having more tendency to show aggressive behavior towards other people or objects around.

Current study's findings related to gender were generally compatible with existing literature. However, the relationship between gender and beliefs about

expressing anger and sadness seem to show a new trend. In existing literature, men were expected to express their anger as it is compatible with masculine social roles. Sadness, on the other hand, was commonly conceptualized as an internalizing emotion that is compatible with femininity. According to the results of this study, women reported to hold more beliefs about the benefit of both anger and sadness expression. Men's beliefs about the harm of expressing anger comprised the most significant difference between men and women. These findings are likely to reflect possible changes in traditional stereotypes related to gender. Çankaya (2009) stated that Westernization and modernization have evoked new aspects in traditional views of gender. Modernization improved Turkish women's political, social and economic status since the 1950's. In addition to that, patriarchal models has been challenging in consequence of developments in technology and media. Traditional stereotypes related to gender still seem to dominate some aspects of life. However, new patterns based on Western values seem to be coexisting and interacting with traditional views of gender. Thus, women's current beliefs about expressing their emotions may not be compatible with the traditional ideals of femininity which expects women to be humble and calm even in compelling situations. More research is needed to understand possible relations between gender stereotypes and emotional expression.

4.3 Beliefs About Emotions and Attitudes Toward Psychotherapy

In this study, it was expected that the beliefs about the harm and benefit of experiencing and expressing emotions (sadness and anger) would be associated with the attitudes toward utilizing psychotherapy services. In more detail, people who hold more beliefs about the harm of expressing and experiencing emotions (sadness and anger) were expected to report more negative attitudes toward psychotherapy compared to the people who hold more beliefs about the benefit of emotions.

Multiple regression analyses were conducted in order to examine which emotional beliefs predicted the attitudes towards psychotherapy. In accordance with

the predictions, people who hold more beliefs about the harm of expressing anger and sadness reported more negative attitudes towards utilizing psychotherapy. Inversely, the beliefs about benefit of expressing sadness was negatively related to the negative attitudes toward therapy. A second regression analysis showed that people who hold more beliefs about the personal harm of expressing emotions reported more negative attitudes toward psychotherapy, whereas an inverse relationship were found between the beliefs about the relational benefit of expressing anger and sadness and negative attitudes toward psychotherapy.

Studies previously reported the tendency to express emotions among the leading factors related to the avoidance of seeking psychological help. Komiya, Good and Sherrod (2000) proposed a significant relationship between emotional expression and help-seeking. Emotional openness was reported as an important predictor of people's willingness to help-seeking. The scholars examined emotional openness according to one dimension of it: *Emotional orientation*. This concept refers to one's attitudes toward experiencing and expressing emotions. Positive orientation refers to being comfortable with emotional experience and expression, whereas, negative emotional orientation refers the tendency to avoid experiencing and expressing emotions. Similar to the current study, anger and sadness, were used to measure the emotional orientation, and negative emotional orientation was reported to be significantly related to more negative attitudes toward seeking help. That is to say, people who hold a more negative attitudes toward the expression of anger and sadness also reported more negative attitudes toward help-seeking (Komiya, Good & Sherrod, 2000).

Moreover, the results of the studies about self-disclosure and self-concealment are in consistence with the findings of this study. Self-disclosure concept which refers the tendency to express personal information was previously examined in relation to the willingness to help-seeking. Also, the concept of self-concealment that refers the tendency to keep personal information was investigated in relation to help-seeking. Cepeda-Benito and Short (1998) reported that high level of self-concealment made one's possibility to seek psychological help three times

less likely, cancelling the effect of perceived distress and lack of social support on help-seeking intentions. Furthermore, Kelly and Achter (1995) reported that self-concealment predicted people's help-seeking intentions and also negative attitudes toward seeking psychological help.

The results of this study are consistent with previous studies about anticipated risk and utility of self-disclosure. Vogel and Wester (2003) examined the relationship between perceived risk of emotional disclosure and attitudes toward seeking help. According to the multiple regression analysis, perceived risk about disclosing emotions to the psychotherapist was among predictive factors of negative help-seeking attitudes. Furthermore, another study reported that anticipated risks and benefits mediated the relationship between the tendency to express emotions and attitudes toward psychotherapy (Vogel, Wade & Hackler, 2008). It would be more likely for one not to express emotions to a counselor if one had a perception that expressing emotions would include certain risks. The scholars suggested that being misunderstood or judged might be a risk of emotional disclosure. The current study showed similar results. For instance, the beliefs about harm of emotions also included negative relational expectations about emotional expression. People who believed that expressing anger and sadness could harm others in relationships or make people to move away from each other reported more negative attitudes towards utilizing psychotherapy.

Previous results constructed a theoretical link between emotional expression and attitudes toward seeking psychological help. The current study was designed to elaborate this relationship examining the beliefs about emotions in more detail. As expected, both the harm of expressing anger and sadness, as well as the benefit of expressing sadness were predictive for people's attitudes toward therapy. People who have more concern about expressing and experiencing these emotions seem to be avoidant to apply for psychotherapy. On the other hand, people who believed that experiencing and expressing sadness was beneficial, reported less negative attitudes toward therapy. Those who are already accustomed to expressing their emotions may also be more accustomed to the outcomes of expression. Thus,

the idea of applying for psychotherapy may not be expected to cause concern in these people. Emotions comprise a very complicated part of human psyche as they have many different origins and compelling aspects. The idea of expressing and understanding emotions in a psychotherapy process may be providing ambiguity and distress in people who already have an avoidant stance in terms of emotional expression.

Moreover, avoidance of emotional expression does not seem like an effective strategy to cope with problems related to mental health. Consequently, emotional processes are highly related to current psychological distress. However, in previous studies, current psychological distress was reported to be a predictor of less negative attitudes toward seeking psychological help. Furthermore, being more open in expressing emotions along with having more psychological distress were reported to be predictive for less negative attitudes toward seeking help, yet the effect of emotional openness was higher than the distress (Komiya, Good & Sherrod, 2000). Due to these findings, it would be meaningful if these findings replicated controlling the effect of current psychological distress.

On the contrary to expectations, the beliefs about benefit of anger expression were not predictive for the attitudes toward psychotherapy. According to results, people's negative perceptions about the outcome of anger had significant effect on people's negative attitudes towards psychotherapy. From a relational perspective, anger was conceptualized as an emotion that threatens interpersonal harmony (Markus & Kitayama, 1991). Interpersonal concerns about anger may be prevailing when people consider applying for psychotherapy. People who hold stronger interpersonal concerns may also have a tendency to maintain relational harmony with their close ones. Expressing sadness and unhappiness may be perceived more valid to strengthen relational bonds, whereas anger expression may be perceived too destructive for relationships. People may have a perception that it would be deteriorating for relationships if they talk about such a destructive emotion, thus they may avoid applying for psychotherapy.

Findings of this study also indicated that people who hold stronger beliefs about the personal harm of emotions reported more negative attitudes toward psychotherapy. Thus, personal concerns about the harm of emotions were more predictive than the relational ones. On the other hand, as far as the benefit of emotions concerned, the beliefs in relational domain were more predictive on the attitudes toward therapy. The people who are more open to express their emotions in relationships seem to have less concerns about psychotherapy process. Thinking that the process of a psychotherapy is in a highly relational nature, these findings seem significant. In that, people who are more open about expressing emotions are likely to be more willing to talk to a psychotherapist. This is consistent with previous findings. Vogel and Wester (2003) also reported a significant relationship between the interpersonal risks of emotional expression and negative attitudes towards help-seeking. People who perceived that disclosing emotions to a psychotherapist would be risky reported more negative attitudes toward seeking psychological help.

The findings in this study constructed new links between the beliefs about harm and benefit of expressing/experiencing emotions in both personal and relational domains. Although statistically significant relationships were found, it should be noted that only 15% of the variance of the negative attitudes toward psychotherapy can be accounted by these results. Moreover, it must be noted that the questionnaire that measure people's beliefs about emotions was developed for this study and validity measures was conducted in the pilot. Thus, in order to determine the reliability of the scale, a factor analysis must be conducted in future studies. Since this study was the first to examine the relations between people's beliefs about anger and sadness, and their attitudes towards psychotherapy, further research is needed to gain more knowledge.

4.4 The Beliefs About Emotions and Cultural Factors

Culturally-based theories suggest that cultural construal of the self constantly effect one's cognition, affect and behavior. Interdependent cultures (e.g.

Chinese culture) tend to value emotional control, mostly in order to protect interpersonal harmony. On the other hand, independent cultures (e.g. American and European culture) tend to value emotional expression (Markus & Kitayama, 1991). Moreover, emotions were categorized due to their socially engaging and disengaging qualities. In that, people with an individually oriented self-construal tend to experience and express more socially disengaging emotions such as pride and anger, whereas, those with an interdependent orientation of self tend to experience emotions, like guilt and relatedness, that are conceptualized as socially engaging emotions (Kitayama, Markus & Kurokawa, 2000; Suh, Diener & Updegraff, 2008). Recently, scholars proposed that, in more individualistic cultures, the expression of anger is more tolerated in relationships. Conversely, it was reported to be less frequent in collectivistic cultures. Anger was among the emotions that people tend to suppress to a great extent, holding the belief that expression of anger could deteriorate interpersonal relations (Geller, Cockell, Goldner & Flett, 2000). Other scholars proposed that expression of anger, disgust and contempt were perceived as more threatening for relationships, compared to the expression of sadness and fear (Safdar et al., 2009).

In this study, we expected that the beliefs related to emotions socially constructed concepts: Sociotropy and autonomy. The beliefs about harm and benefit of emotions in relational and personal domains were expected to be related to sociotropy and autonomy, respectively. However, the results did not indicate significant relationships between those. The scores that reflected the beliefs about emotions in both relational and personal domains were positively correlated with personal styles of sociotropy and autonomy. These inconsistent results may be related to the conceptualization of these constructs. According to Clark and Beck (1991), sociotropy and autonomy are not distinct concepts, an individual may have the features of both. Also, related concepts of self-construal, autonomy and relatedness, have been reported to exist together in self-conceptions of Turkish young people. The findings of cultural studies in Turkey suggest that an interaction of both Western and non-Western values exist together (İmamoğlu, 1998; Kağıtçıbaşı, 2005; İmamoğlu & Karakitapoğlu-Aygün, 2007). Since self-aspects

were conceptualized as coexisting constructs, it may not be very distinctive to consider those as different concepts.

On the other hand, it was reported in literature that autonomy was in association with interpersonal insensitivity and having much problems in relationships (Clark & Beck, 1991). According to that, people with an autonomous style were expected to hold less beliefs about the relational harm of expressing emotions, compared to the people with more of a sociotropic personality style. However, the findings of the current study were not consistent with this. Thus, sociotropy and autonomy did not seem to be distinguishing in terms of the people's personal and relational beliefs related to emotional expression.

4.5 Clinical Implications of the Findings

In literature, a large number of studies demonstrates that the negative attitudes toward help-seeking is related to the emotional experience and expression (Vogel & Wester, 2003; Vogel, Wade & Hackler, 2008). However, there is a lack of research in this field in Turkey. This study extends the previous research by not only addressing emotional predictors of people's underutilization of mental health services in Turkey but also constructing more detailed relationships between Turkish young people's beliefs about emotions and attitudes toward psychotherapy. The results showed that the beliefs about harm of expressing anger and sadness predicted negative attitudes toward psychotherapy. Moreover, there was an inverse relationship between the beliefs about the benefit of expressing sadness and negative attitudes toward psychotherapy. Understanding how Turkish people's beliefs about experiencing and expressing emotions effect their thoughts about psychotherapy. Thus, it is important to understand extensively both the beliefs about emotions and other possible mechanisms behind people's negative attitudes in order to increase the help-seeking behavior.

In conclusion, the findings of the study support previous findings about the emotions and help-seeking attitudes (Vogel & Wester, 2003; Vogel, Wade & Hackler, 2008). Moreover, this study adds to the help-seeking literature by

demonstrating more complex interactions between emotions and help-seeking. Previous studies proposed empirical support about the relationship between emotional expressiveness and attitudes toward seeking help, while this study helps to understand this relationship in more detail.

Understanding emotional processes more precisely will contribute mental health professionals to help clients in changing their unhealthy beliefs about emotions. Furthermore, when the clinicians have knowledge about the context of client's negative beliefs about emotions they may have the ability to address those beliefs, as well as their relation to clients' concerns about psychotherapy process. Gaining more knowledge about the beliefs about emotions may provide more effective intervention strategies in psychotherapy. Also, the more effective strategies may be developed in order to make people utilize mental health services more by considering the negative effect of emotions.

4.6 Limitations and Directions for Future Research

The findings of this research provide important baselines for future studies. The relationship between the beliefs about emotions and attitudes toward psychotherapy was investigated first time in the scope of this study. More specifically, this study served as the first attempt in examining the association between the beliefs about both harm and benefit of emotions, as well as elaborating the beliefs in personal and relational domains.

One of the limitations of the present study is that it was not possible to understand causal relationships between variables as the findings were correlational. Future research may be designed to gain knowledge about the causal relationships between the variables of this study. Another limitation may be common method variance as some part of the data was collected at one point in time in this study. This may have caused a potential shared method variance, thus false internal consistency may be present in the analysis.

Moreover, it must be noted that participants' reports about their beliefs about emotions may not have a significant effect on their decisions and actions in

life, for instance the decision to apply for psychological help. For this reason, future research should examine the relationship between the beliefs about emotion, attitudes towards psychotherapy and actual intentions to seek psychological help. Additionally, it may be useful to investigate the other factors that have been conceptualized as predictive in help-seeking process such as demographic factors, stigma, types of psychological problems and the level of perceived psychological distress, perceived social support, together with the beliefs about emotions. This may provide a better understanding about which of these factors predict better people's negative attitudes toward psychotherapy, as well their unwillingness to apply for getting psychological help.

Furthermore, the participants of this study consisted of Turkish university students that are in the developmental age group of young adults. It may be beneficial to replicate this research with participants from different age groups in future studies. Also, replicating this study in samples that include more risk for psychological distress is suggested.

In this study, a new scale was developed and used to measure the beliefs about the harm and benefit of emotions. The validity of this scale was examined yet conducting a factor analysis was not convenient in the scope of this research. Thus, future analysis should be conducted in order to determine the factors of the questionnaire and improve the items if necessary. An important limitation of the new measurement is that it includes only the emotions anger and sadness. Anxiety, for instance, is another emotion that is highly related to psychopathological symptoms. Future research that focuses on this scale is suggested to include items about anxiety, as well as other emotions.

The Personal Styles Inventory was translated and used in the present study for the first time. Presenting some evidence of this scale's reliability and validity with a Turkish sample is another contribution of this study. However, more research is needed for developing the validity and reliability of the Turkish version of this scale. On the other hand, sociotropy and autonomy styles of personality were not related to the relational and personal beliefs about emotions, as expected in this study. Those hypotheses are recommended to be tested after improving the new

scale's validity in terms of measuring the beliefs in personal and relational domains separately. Also, the personal and relational beliefs about emotions may be examined in relation to other similar constructs such as the independent/interdependent or the autonomous-relational self-construal (Kagitcibasi, 2005).

In this study, people's attitudes toward psychotherapy were examined by the Thoughts About Psychotherapy Survey which measures people's concerns related to the psychotherapy process in three domains: Therapist's responsiveness in therapy, concerns about how the therapist see the client and concerns about being forced or manipulated to think and do things that one does not want to. The limitation of this measurement is its lack of conception about a psychotherapy process. In Turkey, people do not seem to have clear knowledge about psychotherapy and psychotherapists as well. The media seems to have a huge impact on this issue. In Turkish movies and TV shows, the image of psychotherapists does not usually include a professional stance. Also, applying for psychological help is usually reflected as something useless and can be fooled. People's attitudes toward psychotherapy or their willingness to apply for psychological help may be effected by their current knowledge and perceptions about this process, as well as about mental health professionals. Thus, Turkish people's knowledge about psychotherapy is suggested to be studied in more detail. For future research, a qualitative study that focuses on people's thoughts about psychotherapy and psychotherapists or the productions of media may be worthwhile for understanding people's thoughts about psychotherapy.

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APPENDICES

Appendix A

Informed Consent Form

(In Turkish)

Katılımcı Onam Formu

Değerli Katılımcı,

Klinik Psikoloji Yüksek Lisans tezim kapsamında yürüttüğüm bu araştırmanın amacı, yetişkinlerin psikolojik yardım almaya dair tutumlarında rol oynayan bazı faktörleri incelemektir.

Bu araştırmaya katılmak için bazı anketleri doldurmanız beklenmektedir. Bu işlem yaklaşık 30 dakikanızı alacaktır. Her anketin başında bulunan yönergeyi dikkatle okumanız ve anketlerdeki her maddeyi eksiksiz yanıtlamanız araştırma sonuçlarının sağlıklı olması açısından önemlidir.

Yaklaşık 200 kişinin katılmasını beklediğimiz bu çalışmaya katılım gönüllülük ve gizlilik esaslarına dayanmaktadır. Kimlik bilgileriniz sadece bu onay formunda görünecek, anketler üzerinde hiçbir kimlik bilgisi yer almayacaktır. Anket sonuçları bireysel olarak değil, toplu bir şekilde değerlendirmeye alınacaktır. Gerekçe göstermeksizin çalışmanın herhangi bir evresinde çalışmadan ayrılabilirsiniz.

Çalışmayla ilgili sorularınız olursa Cansu Paçacı Sunkar'a cansupacacii@gmail.com e-posta adresinden, çalışmanın danışmanı olan Yrd. Doç. Dr. Zeynep Çatay'a zeynep.catay@bilgi.edu.tr e-posta adresinden veya 212-

311 7616 telefon numarasından ulaşabilirsiniz.

Değerli katılımınız için şimdiden teşekkür ederiz!

Bu çalışmaya tamamen gönüllü olarak katılıyorum. Verdiğim bilgilerin bilimsel amaçlı yayınlarda kullanılmasını kabul ediyorum. Verdiğim bilgilerin bilimsel amaçlı yayınlarda kullanılmasını kabul ediyorum. (Formu doldurup imzaladıktan sonra uygulayıcıya geri veriniz.)

İsim Soyad:

Tarih: __ / __ / __

İmza:

Appendix B

Demografik Bilgi Formu

Tarihi: __ / __ / __

Kişisel Bilgiler:

1. Cinsiyet: () Kadın () Erkek
2. Yaş: _____
3. Okuduğunuz Üniversite: _____
4. Üniversitede Eğitim Gördüğünüz Bölüm: _____
5. Üniversitede Sınıfınız: _____
6. Daha önce bir uzmandan kendiniz için psikolojik yardım aldınız mı?
() Evet () Hayır
7. Daha önce bir uzmandan kendiniz için psikolojik yardım almayı hiç düşündünüz mü? (Lütfen uygun olan tüm seçenekleri işaretleyiniz.)
() Psikolojik yardım almayı düşündüm ve aldım.
() Böyle bir şeye hiç gerek duymadım.
() Şimdiye kadar düşünmedim ama gelecekte psikolojik yardım almayı isteyebilirim.
() Düşündüm ama maddi sebeplerden dolayı mümkün olmadı.
() Düşündüm ama vakit bulamadığım için başvurmadım.
() Düşündüm ama çevrem tarafından olumsuz karşılanır diye vazgeçtim.
() Düşündüm ama bir faydası olabileceğine inanmadığım için başvurmadım.
() Düşündüm ama sorunlarımı bir uzmana açamayacağım için vazgeçtim.
() Düşündüm ama kendi kendime sorunlarımı halledebileceğime inandığım için başvurmadım.

Düşündüm ama sorunların zamanla kendi kendine çözüleceğine inandığım için başvurmadım.

Diğer (belirtiniz):

Eğer daha önce bir uzmandan psikolojik yardım almadıysanız, bu sayfadaki soruları yanıtlamadan geçebilirsiniz.

1. Eğer daha önce bir uzmandan kendiniz için psikolojik yardım aldıysanız, hangi meslek grubundan aldınız?

- Psikolojik Danışman
 Psikolog
 Psikiyatrist
 Okuldaki Rehberlik Servisi
 Diğer (belirtiniz) :

2. Eğer daha önce bir uzmandan kendiniz için psikolojik yardım aldıysanız, ne süreyle aldınız, belirtiniz: _____

3. Eğer daha önce bir uzmandan kendiniz için psikolojik yardım aldıysanız, aldığınız psikolojik yardım size ne kadar yardımcı oldu?

- Hiç yardımcı olmadı
 Biraz yardımcı oldu
 Oldukça yardımcı oldu
 Son derece yardımcı oldu

Appendix C

Beliefs About Harm and Benefit of Expressing Emotions Questionnaire

(In Turkish)

Duyguları İfade Etmenin Yararları ve Zararlarına Dair İnançlar Anketi

Aşağıdaki ifadeler insanların kendi duyguları hakkında sahip oldukları düşüncelerle ilgilidir. Lütfen her bir maddeyi okuyunuz ve bu maddeye genelde ne kadar katıldığınızı uygun cevabı işaretleyerek belirtiniz. Doğru ya da yanlış cevap bulunmamaktadır. Önemli olan sizin her bir soruya mümkün olduğunca dürüst bir biçimde cevap vermenizdir. Lütfen tüm maddeleri cevaplayınız.

İFADELER	1- Kesinlikle katılmıyorum	2- Katılmıyorum	3- Biraz katılıyorum	4- Orta derecede katılıyorum	5- Kesinlikle katılıyorum
1. Öfkenin ifade edilmesi kişiye rahatlama sağlar.	1	2	3	4	5
2. Kişi bir kez öfkelenmeye başladığında sakinleşmesi	1	2	3	4	5
3- Öfkemi ifade etmem diğer insanları üzebilir.	1	2	3	4	5
4- Kişilerarası ilişkilerde öfkeyi ifade edebilmek	1	2	3	4	5
5- Aile büyüklerine öfkelenmek saygısızlıktır.	1	2	3	4	5

6- Öfkelenmemeye çalışmak çoğu zaman yapılacak en	1	2	3	4	5
7- Öfkeyi ifade etmek ilişkilerin gelişmesini sağlar.	1	2	3	4	5
8- Öfke insana harekete geçiren bir enerji verir ve bir şeyleri başarabilmesini sağlar.	1	2	3	4	5
9- Öfkelenmek beni duygusal olarak yıpratır.	1	2	3	4	5
10- Öfkenin ifade edilmesi ilişkilerdeki sorunların görülmesini ve çözülmesini sağlar.	1	2	3	4	5
11- Öfkelenmenin riski kontrolü kaybetmektir.	1	2	3	4	5
12- Öfkelenmek bana fiziksel olarak zarar verir.	1	2	3	4	5
13- Öfkemi ifade edersem sonrasında utanırım.	1	2	3	4	5
14- Öfkem giderek artar ve diğerlerini bundan koruyamaz hale gelebilirim.	1	2	3	4	5
15- Öfkelenmek çocukça ve mantıksızdır.	1	2	3	4	5
16- Öfkemi ifade edersem sonrasında vicdan azabı	1	2	3	4	5
17- Öfkemi ifade edersem yakınlarımı kendimden	1	2	3	4	5
18- Öfkelenirsem diğerleri de bana öfkelenir.	1	2	3	4	5
19- Öfkesini ifade edemeyen biri sonuçta mutsuz olur.	1	2	3	4	5
20- Öfkeyi ifade etmek ilişkilerde beklentilerin	1	2	3	4	5
21- Öfkemi ifade edersem çevrem üzerinde bir etkim	1	2	3	4	5
22- Öfkemi belli etmek reddedilmeme neden olur.	1	2	3	4	5
23- Öfkemi ifade etmek gereksizdir, hiçbir şeyi	1	2	3	4	5
24- Üzgün hissettiğimde bu his beni tümüyle teslim	1	2	3	4	5

25- Üzüntümü ifade etmek ilişkileri geliştirir.	1	2	3	4	5
26- Üzüntümü ifade etmem diğerlerinden destek	1	2	3	4	5
27- Üzgün hissetmek zayıf ve yetersiz olduğum	1	2	3	4	5
28- Üzüntümü belli edersem insanlara koz vermiş	1	2	3	4	5
29- Üzgün hissetmek iç dünyamı zenginleştirir; kendimi ve başkalarını daha iyi anlarım.	1	2	3	4	5
30- Üzgün hissetmek benim için mantıklı değildir.	1	2	3	4	5
31- Ara sıra üzgün hisseden insanlar başkalarının duygularına karşı daha duyarlı olabilir.	1	2	3	4	5
32- Üzgün hissetmek zaman kaybıdır.	1	2	3	4	5
33- Üzüntümü ifade etmek sorunların görülüp	1	2	3	4	5
34- Üzüntünün ifade edilmesi kişiye rahatlama sağlar.	1	2	3	4	5
35- Üzüntümü ifade edersem diğer insanlar da üzülür.	1	2	3	4	5
36- Üzüldüğümde bu duygudan etkilenmem ve yokmuş gibi davranırım.	1	2	3	4	5
37- Üzgün hissetmek yaratıcı olmama yardımcı olur.	1	2	3	4	5
38- Üzgün hissetmek benim için neyin önemli olduğunu fark etmeme yardım eder.	1	2	3	4	5
39- Üzüntümü ifade edersem diğerleri tarafından	1	2	3	4	5
40- Üzgün hissetmek tamamen tüketici bir duygudur.	1	2	3	4	5
41- Bir kişinin sürekli mutsuz olması diğer insanları	1	2	3	4	5
42- Üzüntümü belli edersem güçsüz görünürüm.	1	2	3	4	5

43- Üzölmek hayatlarındaki bir şeyleri değıştirmek veya düzeltmek için insanları motive edebilir.	1	2	3	4	5
44- Yakın ilişkilerde üzüntümü rahatlıkla ifade	1	2	3	4	5
45- Bir kez üzgün hissetmeye başlarsam bunu durdurmak için yapabileceğim hiçbir şey yoktur.	1	2	3	4	5
46- Üzgün hissetmek işleri halletmeme engel olur.	1	2	3	4	5

Appendix D

Personal Styles Inventory

(In Turkish)

Kişisel Tarzlar Ölçeği

Aşağıda bazı ifadeler verilmiştir. Lütfen, her bir ifadenin sizi ne derece iyi tanımladığını ilgili yeri işaretleyerek belirtiniz. Her soru için 1'den 6'ya kadar sıralanmış numaralardan birini daire içine alarak işaretleyiniz. Lütfen bütün soruları cevaplayınız.

İFADELER		1- Kesinlikle katılmıyorum	2- Katılmıyorum	3- Pek katılmıyorum	4- Biraz katılıyorum	5- Katılıyorum	6- Kesinlikle katılıyorum
1	Genellikle başkalarının ihtiyaçlarını kendi ihtiyaçlarımla önüne koyarım.	1	2	3	4	5	6
2	Genellikle insanları belli bir mesafede tutarım.	1	2	3	4	5	6
3	Sevdiğim insanlardan ayrılmak benim için zordur.	1	2	3	4	5	6
4	Benden bir şeyler talep eden insanlardan çabucak rahatsız olurum.	1	2	3	4	5	6
5	Başkalarının duygularını nasıl etkilediğim konusunda çok duyarlıyım.	1	2	3	4	5	6
6	Başkalarından gelecek yardıma bel bağlamaktan hoşlanmam.	1	2	3	4	5	6

7	Başkaları tarafından eleştirilmeye karşı çok hassasım.	1	2	3	4	5	6
8	Ortalama ve sıradan biri olduğumu hissetmek beni rahatsız eder.	1	2	3	4	5	6
9	Başkalarını incitmekten veya rencide etmekten çok çekinirim.	1	2	3	4	5	6
10	Keyifsiz hissettiğimde başkalarının bana ilgi göstermesinden hoşlanmam.	1	2	3	4	5	6
11	Bir ilişki beni mutsuz ediyor olsa bile, onu bitirmek benim için zordur.	1	2	3	4	5	6
12	İlişkilerde insanların genellikle birbirlerinden çok fazla şey talep ettiklerini düşünüyorum.	1	2	3	4	5	6
13	Bir konuda başkaları beni kolaylıkla ikna edebilir.	1	2	3	4	5	6
14	Bir konudaki performansımı genellikle ya eksiksiz bir başarı ya da tam bir başarısızlık olarak görürüm.	1	2	3	4	5	6
15	Başkalarını memnun etmek için çok uğraşırım.	1	2	3	4	5	6
16	İnsanların benim özelime girmesinden hoşlanmam.	1	2	3	4	5	6
17	Bütün bir günü yalnız geçirmek benim için zordur.	1	2	3	4	5	6
18	Benim üzerimde yetki sahibi olan insanların bana ne yapacağımı söylemelerine katlanmam zordur.	1	2	3	4	5	6
19	Genellikle başkalarının sorunlarını çözme konusunda kendimi sorumlu hissederim.	1	2	3	4	5	6
20	Önemli kararları genellikle kimseye söylemeden alırım.	1	2	3	4	5	6

21	Bir ilişki sona erdiğinde, kayıp hissini üstesinden gelmek benim için çok zordur.	1	2	3	4	5	6
22	Başkalarının bir konuda bana bağlı olmasından hoşlanmam.	1	2	3	4	5	6
23	Başkaları tarafından sevmek ve beğenilmek benim için çok önemlidir.	1	2	3	4	5	6
24	Bir şeyleri başarmak için aktif olarak çaba göstermediğim zamanlarda kendimi kötü hissederim.	1	2	3	4	5	6
25	Başkalarına karşı hep nazik olmam gerektiğini hiss ediyorum.	1	2	3	4	5	6
26	Hayranlık ve sevgiyi ifade etmek benim için zordur.	1	2	3	4	5	6
27	Tatsız bir şey başıma gelirse hemen irtibata geçebileceğim birilerinin yakınımda olduğundan emin olmak isterim.	1	2	3	4	5	6
28	Uzun süreli ilişkiler yaşamak benim için zordur.	1	2	3	4	5	6
29	Başkalarına karşı hep mahcup hiss ederim.	1	2	3	4	5	6
30	Duygularımı ve diğer kişisel şeyleri birine açıp bunlarla ilgili konuşmak benim için zordur.	1	2	3	4	5	6
31	Diğerlerinin bir konuda bana nasıl tepki vereceğini çok fazla düşünürüm.	1	2	3	4	5	6
32	Bir konuda elimden geleni yapmazsam içim rahat etmez.	1	2	3	4	5	6
33	Birinin beni sevip sevmediğinden emin olmadığım da çok rahatsız olurum.	1	2	3	4	5	6
34	Ben önemli bir karar vermeye çalışırken başkalarının tavsiye vermesini müdahaleci bulurum.	1	2	3	4	5	6

35	Başkalarının isteklerine "hayır" demek benim için zordur.	1	2	3	4	5	6
36	Başkalarının davranışlarımı yönlendirmeye çalışması beni sinirlendirir.	1	2	3	4	5	6
37	Başıma bir şey geldiğinde etrafta konuşacak kimse yoksa çok üzülürüm.	1	2	3	4	5	6
38	Hayatımla ilgili sorular sorulmasını genellikle mahremiyetime saldırı gibi hissederim.	1	2	3	4	5	6
39	Ancak başkalarının benden beklediği şekilde davranırsam içim rahat eder.	1	2	3	4	5	6
40	İnsanlar veya koşullar planlarımı engellerse çok mutsuz olurum.	1	2	3	4	5	6
41	Başkalarının benden faydalanmasına sık sık izin veriyorum.	1	2	3	4	5	6
42	Önemli bir karar verirken başkalarının tavsiyelerine nadiren güvenirim.	1	2	3	4	5	6
43	Bir arkadaşım bir randevuyu iptal ettiğinde ya da söz verip beni aramayı unuttuğunda çok üzülürüm.	1	2	3	4	5	6
44	Kişisel bağımsızlığım ve özgürlüğüm sınırlandığında, tanıdığım birçok insandan daha çok rahatsız oluyorum.	1	2	3	4	5	6
45	Başkalarının benim hakkımdaki fikirlerine ve hislerine göre kendimi değerlendiririm.	1	2	3	4	5	6
46	Başkaları benim bir probleme bakış açımı etkilemeye çalışırsa bozulurum.	1	2	3	4	5	6
47	Başkalarına öfkelendiğimde bunu belli etmek benim için zordur.	1	2	3	4	5	6
48	Başkaları benim planlarımla ilgili söz sahibi olduğunda kontrol altına alındığımı hissederim.	1	2	3	4	5	6

Appendix E

Thoughts About Psychotherapy Survey

(In Turkish)

Psikoterapi Hakkındaki Düşünceler Ölçeği

Bu araştırmanın amacı doğrultusunda doldurmanız için size verilen bu anketteki “psikolojik yardım” ve “psikoterapi” kavramları, eş anlamlı olarak dönüşümlü kullanılmıştır ve “bireylerin (danışanların) kişisel, sosyal, eğitimsel ve mesleki alanlarda gelişmeleri, bu alanlarda karşılaştıkları sorunlarla başa çıkabilmeleri ve genel olarak, yaşamlarını doyum alarak sürdürebilmeleri amacıyla sunulan profesyonel psikolojik yardım”ı ifade etmektedir. Ayrıca, bu anket kapsamında “terapist” terimi, “profesyonel psikolojik yardım sunma” yeterlilik ve yetkisine sahip uzmanları (psikolojik danışman, psikolog, psikiyatrist) ifade eden bir terimdir.

Bu anketi doldururken lütfen, kişisel bir sorununuz için bir terapistte gitmeye karar verdiğiniz hayal ediniz. Her soru için 1’den 5’e kadar sıralanmış numaralardan birini seçmeniz gerekmektedir.

Beni hiç endişelendirmez

Beni çok endişelendirir

1

2

3

4

5

		Beni hiç endişelendirmez				Beni çok endişelendirir
1.	Sorunlarımı çözmek için psikoterapiye mi ihtiyacım var?	1	2	3	4	5
2.	Psikoterapide, bana, bir insan olarak davranılmaktan çok bir vaka olarak mı	1	2	3	4	5

	davranılacak?					
3.	Terapist bana karşı dürüst olacak mı?	1	2	3	4	5
4.	Terapist sorunlarımı ciddiye alacak mı?	1	2	3	4	5
5.	Terapist benim değerlerime saygı gösterecek mi?	1	2	3	4	5
6.	Psikoterapide, söylediğim her şey gizli tutulacak mı?	1	2	3	4	5
7.	Düşündüğüm ve hissettiğim her şeyi anlatırsam, terapist, kötü biri olduğumu düşünür mü?	1	2	3	4	5
8.	Terapist, sorunumu anlayacak mı?	1	2	3	4	5
9.	Arkadaşlarım, psikolojik yardım aldığım için anormal veya garip biri olduğumu düşünür mü?	1	2	3	4	5
10.	Terapist, gerçekte olduğumdan daha sorunlu olduğumu düşünür mü?	1	2	3	4	5
11.	Terapist, benimle ve hayatımla ilgili, bilmesini istemediğim şeyleri açığa çıkarır mı?	1	2	3	4	5
12.	Psikoterapide, kendimle ilgili gerçekten bilmek istemeyeceğim şeyleri öğrenir miyim?	1	2	3	4	5
13.	Psikoterapi esnasında duygularımın kontrolünü kaybeder miyim?	1	2	3	4	5
14.	Terapist, sorunumu çözmek için gerekli yeterliliğe sahip midir?	1	2	3	4	5

15.	Psikoterapide, istemediğim şeyleri yapmaya zorlanacak mıyım?	1	2	3	4	5
16.	Psikoterapide, yaşam tarzımda o anda istemediğim veya yapamayacağım değişiklikleri yapmaya zorlanacak mıyım?	1	2	3	4	5
17.	Psikoterapide, istemediğim şeyler hakkında konuşmaya zorlanacak mıyım?	1	2	3	4	5
18.	Psikoterapi sürecinin sonunda, olaylar veya dünya hakkındaki düşünme ya da hissetme biçimim tamamen değişecek mi?	1	2	3	4	5
19.	Terapistte gitme düşüncesi, genellikle kaygılanmama, gerilmeme veya korkmama neden olur.	1	2	3	4	5

