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Humor and emotion regulation in remitted depression: Differential effects of humor related to distress versus humor unrelated to distress

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Depression is a highly recurrent disorder, and there is increasing evidence that enhancing adaptive emotion regulation decreases vulnerability to future episodes. It is unclear, however, which regulation strategies are particularly worth developing. This study investigated one of the most promising strategies, humor, and compared the effects of two specific types: humor related to distress (humorous reappraisal) and humor unrelated to distress (distraction by unrelated joking). Remitted depressed outpatients (N = 122) underwent psychiatric and neuropsychological assessments—followed by an experiment evoking personal distress and subsequent application of one of three strategies (humor related to distress, humor unrelated to distress, and a control condition). Positive emotions, negative emotions, and experienced distress were assessed at four time intervals, and there was a single measurement of invested efforts, subsequent performances, and intrusive thoughts. Unlike rational simulation, both humor types improved emotional experience, and reduced distress in the short and longer terms. Humor unrelated to distress, however, more effectively down-regulated negative emotions and intrusive thoughts. Moreover, although patients with impaired sustained attention did not recover their initial level of negative emotions, this did not pertain to those who applied humor unrelated to distress. Surprisingly, despite the expected costs of humor, similar efforts were required when compared to rational regulation and no performance impairment was found. This is the first study on distinct humor types and emotion regulation in depression. The results suggest humor, especially distractive one, could broaden remitted patients' repertoire of effective strategies for dealing with distressing, and potentially triggering, events.

Biography

Anna Braniecka is an assistant professor at the Institute of Clinical Psychology (Faculty of Positive Psychology) at SWPS University and has 14 years' experience as a clinical psychologist. Her research combines clinical studies with positive psychology and thus goes beyond the traditional symptom-focused approach to mental disorders by investigating psychiatric patients' wellbeing, strengths and resilience. Together with her team, she is currently implementing a research grant on self-regulation in recurrent depression. She is a founding member of the Positive Psychology Society (Poland)—involved in many campaigns aimed at improving the state of mentally ill people (e.g., the Mental Health Protection Programme, Faces of Depression, Forum Against Depression).

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