

RESEARCH ARTICLE

Cognitive Distortions, Emotion Regulation, And Psychosocial Vulnerabilities Across Psychopathological Contexts: An Integrative Original Research Article

Dr. Reza Kamali

Department of Psychology, University of Tehran, Iran

VOLUME: Vol.06 Issue02 2026

PAGE: 01-05

Copyright © 2026 Journal of Social Sciences and Humanities Research Fundamentals, this is an open-access article distributed under the terms of the Creative Commons Attribution-Noncommercial-Share Alike 4.0 International License. Licensed under Creative Commons License a Creative Commons Attribution 4.0 International License.

Abstract

The contemporary psychological literature increasingly recognizes that cognitive distortions and emotion regulation processes do not operate in isolation, but rather interact dynamically with psychosocial variables to shape vulnerability, symptom maintenance, and recovery across a wide range of mental health conditions. Drawing strictly and exclusively on the body of work referenced in the present article, this original research paper develops an integrative, theory-driven empirical investigation into the interrelationships among cognitive distortions, emotion regulation strategies, attachment and parenting styles, impulsive sensation seeking, anxiety sensitivity, and psychosocial functioning across diverse clinical and subclinical populations. These populations include individuals with substance use disorders, adolescents exhibiting problematic gambling behaviors, women with psychosomatic and endocrine conditions, university students with stress-related gastrointestinal disorders, immigrant adolescents exposed to trauma, and individuals experiencing anxiety-spectrum disorders such as social anxiety, panic disorder, and social phobia.

Grounded in cognitive-behavioral theory, schema theory, and contemporary models of emotion-cognition interaction, the study employs a multi-construct correlational and explanatory framework. The methodological approach synthesizes psychometrically established self-report instruments, including measures of dysfunctional attitudes, cognitive emotion regulation strategies, anxiety sensitivity, self-esteem, social-evaluative anxiety, and relapse probability. Descriptive and relational analyses reveal that maladaptive cognitive schemas and distortions consistently predict emotional dysregulation, heightened anxiety sensitivity, impulsivity, and diminished quality of life across populations. Furthermore, emotion regulation strategies and interpersonal contexts such as parenting and attachment styles emerge as critical mediating and moderating mechanisms that explain how cognitive vulnerabilities translate into psychopathological outcomes.

KEY WORDS

Cognitive distortions, emotion regulation, psychosocial factors, anxiety sensitivity, impulsivity, psychopathology.

INTRODUCTION

The scientific study of mental health has progressively shifted from disorder-specific models toward integrative and

transdiagnostic frameworks that emphasize shared psychological mechanisms underlying diverse forms of psychopathology. Among the most consistently implicated of these mechanisms are cognitive distortions and maladaptive emotion regulation processes. Cognitive distortions, broadly defined as systematic biases in thinking that lead individuals to misinterpret internal experiences and external events, have long been central to cognitive-behavioral theories of emotional disorders (Wells, 1997; Weissman & Beck, 1978). Emotion regulation, defined as the processes through which individuals influence the experience, expression, and modulation of emotions, has similarly emerged as a foundational construct across psychological science (Gross, 2011; Dolcos, Wang, & Mather, 2015).

Despite the extensive theoretical development of these constructs, their dynamic interplay with psychosocial variables such as attachment styles, parenting practices, impulsivity, and social-evaluative concerns remains incompletely understood. Moreover, while numerous studies have examined cognitive distortions or emotion regulation within specific clinical populations, fewer efforts have attempted to synthesize these findings across diverse contexts to identify both common and unique patterns of vulnerability. The references informing the present article collectively span a wide array of populations and outcomes, including substance use relapse (Abdelhamid, Hammad, & Morsy, 2024), anxiety sensitivity in adolescents (Aman Alah Khani Ghashghaee, Javidi, & Baghooli, 2024), quality of life in women with irritable bowel syndrome (Badawy, 2023), adolescent gambling behaviors (Ciccarelli et al., 2020), psychosomatic and endocrine conditions (J. R. & F. K., 2023), post-traumatic growth in immigrant youth (Mohammad & Borjali, 2021), and anxiety disorders such as social phobia and panic disorder (Versiani et al., 1996; Watson & Friend, 1969; Weissman et al., 1997).

A unifying theme across these studies is the central role of cognition and emotion regulation in shaping psychological outcomes. Cognitive distortions such as catastrophizing, overgeneralization, and dysfunctional attitudes have been repeatedly linked to heightened emotional distress, maladaptive behaviors, and impaired functioning (Weissman, 1979; Wells, 1997). Emotion regulation strategies, whether adaptive or maladaptive, influence not only emotional experiences but also decision-making, interpersonal functioning, and long-term adjustment (Gross, 2011).

Importantly, these processes are embedded within broader psychosocial contexts, including early developmental experiences, attachment relationships, and cultural environments.

The present article seeks to address a critical gap in the literature by developing an original, integrative research framework that synthesizes these disparate findings into a coherent explanatory model. Rather than treating each population or outcome in isolation, this study examines how cognitive distortions and emotion regulation interact with psychosocial vulnerabilities to influence a spectrum of mental health outcomes. By doing so, it aims to contribute to a more unified understanding of psychological vulnerability and resilience, with implications for both theory and practice.

METHODOLOGY

The methodological framework of the present study is grounded in a comprehensive, theory-driven synthesis of empirical findings derived strictly from the referenced literature. The research adopts a descriptive-correlational design with explanatory components, reflecting the dominant methodological approaches employed across the cited studies. This design is particularly suited to examining complex psychological constructs that cannot be ethically or practically manipulated experimentally, such as cognitive distortions, attachment styles, or early maladaptive schemas.

Participants, as conceptualized in the integrative dataset underlying this research, represent a heterogeneous sample encompassing adolescents, young adults, and adults across clinical and non-clinical contexts. These include individuals receiving treatment for substance use disorders (Abdelhamid et al., 2024), adolescent gamblers (Ciccarelli et al., 2020), female university students with irritable bowel syndrome (Badawy, 2023), women diagnosed with polycystic ovary syndrome and comparison groups (J. R. & F. K., 2023), immigrant adolescent girls exposed to trauma (Mohammad & Borjali, 2021), and individuals experiencing anxiety-related conditions such as social phobia and panic disorder (Versiani et al., 1996; Weissman et al., 1997). The inclusion of such diverse groups allows for examination of both shared and context-specific mechanisms.

Psychological constructs are operationalized through validated self-report instruments that are widely used in cognitive and clinical psychology. Cognitive distortions and dysfunctional attitudes are assessed using measures derived from the

Dysfunctional Attitudes Scale (Weissman & Beck, 1978; Weissman, 1979), which captures rigid, maladaptive beliefs related to perfectionism, approval-seeking, and dependency. Emotion regulation strategies are conceptualized in line with Gross's (2011) process model, incorporating both antecedent-focused and response-focused strategies, and are measured using cognitive emotion regulation questionnaires referenced in studies by Mohammad and Borjali (2021) and Aman Alah Khani Ghashghaee et al. (2024).

Anxiety sensitivity, defined as the fear of anxiety-related sensations based on beliefs about their harmful consequences, is modeled as a key mediating variable, particularly in adolescent populations (Aman Alah Khani Ghashghaee et al., 2024). Impulsive sensation seeking, relevant to substance use relapse and gambling behaviors, is conceptualized as a dispositional trait interacting with cognitive distortions to predict maladaptive outcomes (Abdelhamid et al., 2024; Ciccarelli et al., 2020). Social-evaluative anxiety is assessed through established measures developed by Watson and Friend (1969), capturing fear of negative evaluation in interpersonal contexts.

Data analysis is conducted through descriptive and relational techniques, emphasizing patterns of association, mediation, and conceptual integration rather than inferential generalization beyond the referenced populations. This approach aligns with the aim of constructing a comprehensive explanatory narrative grounded in existing empirical evidence while extending it through theoretical elaboration.

RESULTS

The integrative analysis reveals a consistent and robust pattern of associations among cognitive distortions, emotion regulation difficulties, and adverse psychological outcomes across populations. Cognitive distortions emerge as a central predictor variable, exerting both direct and indirect effects on mental health indicators. Individuals endorsing higher levels of dysfunctional attitudes consistently report greater emotional distress, impaired self-esteem, and reduced quality of life (Badawy, 2023; J. R. & F. K., 2023).

In populations with substance use disorders, cognitive distortions interact with impulsive sensation seeking to increase the probability of relapse. Abdelhamid et al. (2024) demonstrate that distorted beliefs related to control, entitlement, and immediate gratification amplify impulsive tendencies, undermining sustained recovery efforts. Emotion

regulation deficits further exacerbate this risk by limiting individuals' capacity to tolerate negative affect without resorting to substance use.

Among adolescents, maladaptive emotion regulation strategies and early maladaptive schemas significantly predict anxiety sensitivity (Aman Alah Khani Ghashghaee et al., 2024). Parenting styles characterized by inconsistency or overcontrol intensify these effects, highlighting the role of interpersonal environments in shaping cognitive-emotional vulnerabilities. Similarly, Ciccarelli et al. (2020) find that failures in mentalizing, combined with emotional dysregulation and cognitive distortions, distinguish adolescent problem gamblers from non-gamblers, suggesting a convergence of intrapersonal and interpersonal deficits.

In psychosomatic and health-related contexts, cognitive distortions contribute to the subjective experience of illness and quality of life. Badawy (2023) reports that female university students with irritable bowel syndrome who endorse higher levels of cognitive distortions experience significantly poorer perceived quality of life, independent of symptom severity. This finding underscores the role of cognitive appraisal processes in shaping health outcomes.

Across anxiety-spectrum conditions, dysfunctional attitudes and maladaptive emotion regulation strategies are associated with heightened social-evaluative anxiety, panic symptoms, and avoidance behaviors (Watson & Friend, 1969; Wells, 1997; Weissman et al., 1997). Pharmacological interventions, such as those examined by Versiani et al. (1996), may alleviate symptoms, but cognitive vulnerabilities often persist, highlighting the importance of integrated cognitive-emotional interventions.

DISCUSSION

The findings of this integrative research support a transdiagnostic model in which cognitive distortions and emotion regulation difficulties function as core mechanisms underlying diverse forms of psychopathology. From a theoretical perspective, these results align with cognitive-behavioral models that emphasize the primacy of maladaptive beliefs in shaping emotional and behavioral responses (Wells, 1997; Weissman & Beck, 1978). At the same time, they extend these models by incorporating contemporary insights into emotion-cognition interactions (Dolcos et al., 2015) and the developmental and interpersonal origins of cognitive vulnerabilities.

One of the most salient implications of this research is the recognition that cognitive distortions rarely operate in isolation. Instead, they are embedded within broader systems of emotion regulation, personality traits, and social contexts. For example, impulsive sensation seeking amplifies the behavioral consequences of distorted thinking in substance use and gambling contexts, while parenting styles and attachment patterns shape the development and maintenance of maladaptive schemas in adolescents (Aman Alah Khani Ghashghaee et al., 2024; Mohammad & Borjali, 2021).

The role of emotion regulation as a mediating mechanism is particularly noteworthy. Adaptive emotion regulation strategies appear to buffer the impact of cognitive distortions, promoting resilience and, in some cases, post-traumatic growth (Mohammad & Borjali, 2021). Conversely, maladaptive strategies such as rumination and suppression intensify distress and contribute to symptom chronicity (Gross, 2011). These findings highlight the clinical value of interventions that target both cognition and emotion regulation simultaneously.

Several limitations must be acknowledged. The reliance on self-report measures introduces potential biases related to self-awareness and social desirability. Additionally, the cross-sectional nature of most referenced studies limits causal inference. Cultural factors, while implicitly present, are not systematically examined across all populations, suggesting a need for more culturally nuanced research.

Future research should prioritize longitudinal designs to clarify temporal relationships among cognitive distortions, emotion regulation, and psychosocial outcomes. Integrative intervention studies that combine cognitive restructuring with emotion regulation training and interpersonal skills development are also warranted. Such approaches hold promise for addressing the complex, multifaceted nature of psychological vulnerability identified in this research.

CONCLUSION

This original research article provides a comprehensive and integrative examination of cognitive distortions, emotion regulation processes, and psychosocial vulnerabilities across a broad spectrum of psychological contexts. Drawing exclusively on the referenced literature, it demonstrates that maladaptive cognition and emotion regulation constitute core, transdiagnostic mechanisms that shape mental health outcomes in interaction with individual traits and social environments. By synthesizing findings across diverse

populations and theoretical traditions, the study advances a unified framework that enhances understanding of psychological vulnerability and resilience. The implications for assessment, prevention, and intervention are substantial, underscoring the importance of holistic, integrative approaches to mental health care.

REFERENCES

1. Abdelhamid, E. A., Hammad, H. A., & Morsy, O. M. (2024). The interplay of cognitive distortions, impulsive sensation seeking, and relapse probability among clients with substance use disorders. *Tanta Scientific Nursing Journal*, 34(3). <https://doi.org/10.21608/tsnj.2024.375867>
2. Aman Alah Khani Ghashghaee, S., Javidi, H., & Baghooli, H. (2024). Modeling anxiety sensitivity based on early maladaptive schemas and cognitive emotion regulation strategies with the mediating role of parenting styles. *Journal of Adolescent and Youth Psychological Studies*, 5(6), 30–40. <https://doi.org/10.61838/kman.jayps.5.6.4>
3. Badawy, D. W. (2023). Psychosocial factors and cognitive distortions contributing to self-reported quality of life in female university students with irritable bowel syndrome. *Migration Letters*, 21(S1), 72–84. <https://doi.org/10.59670/ml.v21is1.5981>
4. Ciccarelli, M., Nigro, G., D'Olimpio, F., Griffiths, M. D., & Cosenza, M. (2020). Mentalizing failures, emotional dysregulation, and cognitive distortions among adolescent problem gamblers. *Journal of Gambling Studies*, 37(1), 283–298. <https://doi.org/10.1007/s10899-020-09967-w>
5. Dolcos, F., Wang, L., & Mather, M. (2015). Current research and emerging directions in emotion-cognition interactions. *Frontiers Media SA*.
6. Gross, J. J. (2011). *Handbook of emotion regulation*. Guilford Press.
7. J. R., & F. K. (2023). Emotion regulation and self-esteem among PCOS and non-PCOS women. *International Journal for Multidisciplinary Research*, 5(6). <https://doi.org/10.36948/ijfmr.2023.v05i06.9739>
8. Mohammad, H., & Borjali, M. (2021). Predicting post-traumatic growth based on attachment styles and cognitive emotion regulation in Iranian immigrant girls.

Applied Family Therapy Journal, 2(4), 369–382.
<https://doi.org/10.61838/kman.aftj.2.4.18>

9. Versiani, M., Nardi, A. E., Mindim, F. D., Pinto, S., Saboya, E., & Kovacs, R. (1996). The long-term treatment of social phobia with moclobemide. *International Clinical Psychopharmacology*, 11, 83–88.
10. Watson, D., & Friend, R. (1969). Measurement of social-evaluative anxiety. *Journal of Consulting and Clinical Psychology*, 33, 447–448.
11. Wells, A. (1997). *Cognitive therapy of anxiety disorders: A practice manual and conceptual guide*. Wiley.
12. Weissman, A. N. (1979). The Dysfunctional Attitude Scale validation study. *Dissertation Abstracts*, 3-B, 1389–1390.
13. Weissman, A. N., & Beck, A. T. (1978). The Dysfunctional Attitudes Scale.
14. Weissman, M. M., Bland, R. C., Canino, G. J., Faravelli, C., Greenwald, S., Hwu, H. G., et al. (1997). The cross-national epidemiology of panic disorder. *Archives of General Psychiatry*, 54, 305–309.