



The Role of Emotion Regulation in Adolescents' Psychological Well-being: A Systematic Literature Review

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ABSTRACT

Emotion regulation has increasingly been recognized as an important psychological process associated with the development and maintenance of various psychological disorders. Difficulties in managing emotional experiences may occur across diagnostic categories, making emotion regulation a relevant construct in transdiagnostic approaches to psychopathology. This study aims to systematically review conceptual and empirical evidence regarding emotion regulation as a transdiagnostic factor in psychological disorders, identify common and disorder-specific regulatory difficulties, and examine their implications for psychological interventions. A systematic literature review was conducted using a structured literature selection and synthesis approach based on the PRISMA 2020 framework. The proposed review period covered 2016–2026, with eligible studies examining emotion regulation in relation to psychological or psychiatric disorders. Data were synthesized narratively to accommodate differences in study designs, clinical populations, measurement instruments, and outcomes. The findings indicate that emotion regulation difficulties are associated with multiple psychological disorders. A 2026 multilevel meta-analysis encompassing 619 studies, 41,590 clinical participants, and 36,787 control participants reported an overall standardized mean difference (SMD) of 1.70 in emotion regulation difficulties. Prominent patterns included increased rumination (SMD = 1.51), experiential avoidance (SMD = 1.00), and expressive suppression (SMD = 0.73), alongside lower acceptance (SMD = -0.85), problem-solving (SMD = -0.63), and cognitive reappraisal (SMD = -0.63). Nevertheless, the patterns and severity of these difficulties varied across diagnostic categories. In conclusion, emotion regulation represents a clinically relevant transdiagnostic framework for understanding psychopathology and informing psychological interventions. However, methodological heterogeneity and limitations in causal evidence should be considered when interpreting these findings.

AUTHORS' CONTRIBUTION

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- B. Acquisition of data;
- C. Analysis and interpretation of data;
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INTRODUCTION

Psychological disorders remain a major challenge in mental health research because their symptoms often overlap and involve psychological processes that may occur across different diagnostic categories. Although diagnostic classifications distinguish disorders according to their characteristic



symptoms, individuals with different diagnoses may experience similar difficulties in managing emotional responses, tolerating distress, and adapting to stressful situations. These observations have encouraged the development of transdiagnostic approaches that investigate psychological mechanisms shared across disorders rather than focusing exclusively on individual diagnoses. Within this perspective, emotion regulation has emerged as an important construct for understanding the development and maintenance of psychopathology (Lincoln et al., 2022; Sloan et al., 2017).

Emotion regulation refers to the processes through which individuals influence the emotions they experience, when they experience them, and how these emotions are expressed or managed. These processes involve recognizing emotional experiences, selecting appropriate regulatory strategies, and adjusting responses according to situational demands (Gross, 2015). Difficulties in emotion regulation may occur when individuals struggle to accept emotional experiences, control impulsive reactions, or access effective strategies during periods of distress. Consequently, emotion regulation difficulties may be associated with psychological symptoms and impaired functioning across different clinical populations. Understanding these processes is therefore important for explaining why individuals with different psychological disorders may experience similar emotional difficulties.

Empirical findings support the relevance of emotion regulation across multiple psychological disorders. Sloan et al. (2017) reviewed evidence concerning emotion regulation as a treatment construct across anxiety, depression, substance use, eating disorders, and borderline personality disorder. Their findings indicated that emotion regulation was relevant to psychological symptoms and treatment outcomes across these conditions. Similarly, Dryman and Heimberg (2018) discussed the roles of cognitive reappraisal and expressive suppression in social anxiety and depression, highlighting the importance of examining how individuals respond to emotional experiences. Such findings suggest that emotion regulation may provide a useful framework for understanding shared psychological processes without assuming that all disorders have identical underlying mechanisms.

Research on emotion regulation has also examined the roles of specific regulatory strategies. Cognitive reappraisal involves changing how an individual interprets an emotional situation, whereas expressive suppression involves inhibiting the outward expression of emotional responses. Other processes, including rumination and experiential avoidance, may contribute to persistent emotional distress when individuals repeatedly focus on negative experiences or attempt to avoid unwanted thoughts and feelings. A meta-analytic investigation by Naragon-Gainey et al. (2017) examined associations between emotion regulation strategies and symptoms of depression, anxiety, and substance use, contributing to an understanding of the relationships between regulatory processes and psychopathology. Nevertheless, the effects of particular strategies should be interpreted in relation to context, individual characteristics, and the demands of specific situations.

The transdiagnostic perspective has also influenced the development of psychological interventions. The Unified Protocol, for example, incorporates emotional awareness, acceptance, cognitive flexibility, and adaptive responses to emotional experiences to address processes relevant to emotional disorders. In a systematic review and meta-analysis, Sakiris and Berle (2019) examined the effectiveness of the Unified Protocol and reported improvements in symptoms associated with emotional disorders. Evidence from intervention research therefore supports the potential clinical value of addressing emotional processes across diagnostic boundaries. However, improvements in emotion regulation and psychological symptoms occurring together do not automatically establish that changes in emotion regulation cause subsequent symptom improvement. The mechanisms underlying treatment outcomes require further investigation through appropriately designed empirical studies.

Recent evidence has strengthened the relevance of emotion regulation as a transdiagnostic construct while also demonstrating differences between clinical populations. A systematic review and multilevel meta-analysis by Clamor et al. (2026), involving 619 studies, 41,590 clinical participants, and 36,787 control participants, reported an overall standardized mean difference of 1.70 in emotion regulation difficulties between clinical and control groups. The analysis identified increased rumination ($SMD = 1.54$), experiential avoidance ($SMD = 1.00$), and expressive suppression ($SMD = 0.73$), alongside lower acceptance ($SMD = -0.85$), problem-solving ($SMD = -0.63$), and cognitive reappraisal ($SMD = -0.63$). These findings indicate that emotion regulation difficulties are substantial across

clinical populations, although the magnitude and configuration of specific difficulties may vary among diagnostic categories.

Despite this progress, several issues remain relevant to the interpretation of existing evidence. First, studies differ in their definitions of emotion regulation, measurement instruments, participant characteristics, and diagnostic categories. Some investigations focus on individual strategies, whereas others examine broader difficulties in emotional functioning. These differences complicate direct comparisons and may limit the generalizability of conclusions across populations. Second, evidence concerning emotion regulation is distributed across studies of particular disorders, regulatory strategies, and psychological interventions. An integrated synthesis is therefore necessary to clarify which findings are consistently observed across diagnostic categories and which may be more specific to particular clinical presentations.

Furthermore, the identification of shared emotional difficulties should not be interpreted as evidence that emotion regulation operates identically in every psychological disorder. Clamor et al. (2026) identified both transdiagnostic and disorder-specific patterns, indicating that a comprehensive understanding of psychopathology must consider common regulatory difficulties alongside variations across diagnoses. Although previous reviews have examined emotion regulation in particular clinical populations and intervention approaches, differences in their scope and emphasis create a need for an integrated interpretation of conceptual and empirical findings. Such a synthesis may help clarify the clinical relevance of emotion regulation while identifying methodological limitations and questions that require further investigation.

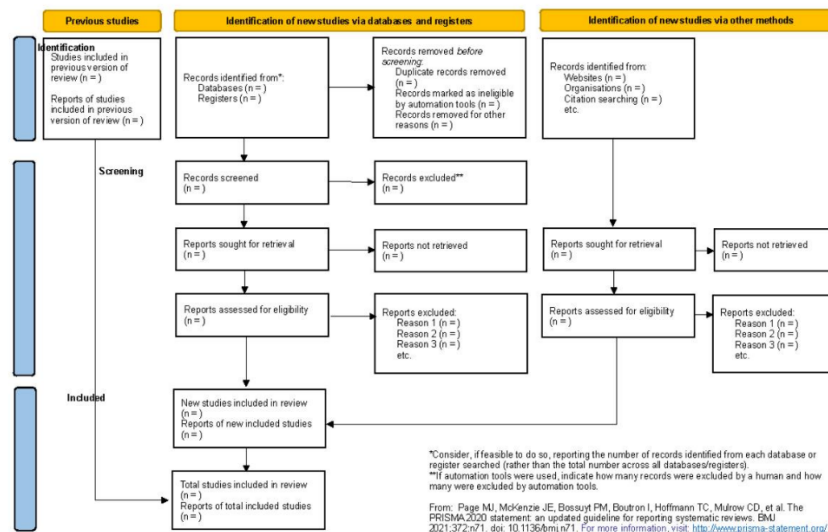
Accordingly, this systematic literature review aims to examine emotion regulation as a transdiagnostic factor in psychological disorders by synthesizing conceptual explanations and empirical findings published within the 2016–2026 period. Specifically, the review seeks to identify emotion regulation strategies associated with psychological disorders, examine common and disorder-specific patterns of emotional difficulties, and evaluate evidence concerning the implications of emotion regulation for psychological interventions. The contribution of this study lies in integrating evidence on shared regulatory processes and diagnostic variations within a single analytical framework. Rather than claiming that emotion regulation is a universal or exclusive cause of psychopathology, this review examines its relevance as a psychological process associated with multiple disorders. Through this synthesis, the study is expected to contribute to a more nuanced understanding of psychopathology and inform the development of interventions that address shared emotional processes while remaining sensitive to disorder-specific characteristics.

METHODS

This study employed a systematic literature review (SLR) to examine emotion regulation as a transdiagnostic factor in psychological disorders. A systematic review was selected because it enables the structured identification, evaluation, and synthesis of empirical evidence concerning psychological processes across diagnostic categories. The review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) 2020 reporting guideline to improve transparency in the reporting of study identification, screening, eligibility assessment, and inclusion (Page et al., 2021). The methodological approach was also informed by established guidance on systematic literature reviews, which emphasizes a clearly defined research question, transparent selection procedures, and a reproducible synthesis process (Snyder, 2019).

Literature searches were designed to identify empirical studies published between 2016 and 2026. The proposed databases were Scopus, PubMed, and APA PsycINFO, with Google Scholar used as a supplementary search source. These sources were selected to capture research in clinical psychology, psychiatry, and psychological assessment. Search terms were developed from the central concepts of the review and combined using Boolean operators. The primary keywords included "emotion regulation," "emotion dysregulation," "transdiagnostic," "psychological disorders," "mental disorders," "psychopathology," "cognitive reappraisal," "expressive suppression," "rumination," and "experiential avoidance." Search strings combined emotion regulation terms with diagnostic and transdiagnostic terms to identify studies examining shared regulatory processes across clinical populations.

Studies were considered eligible when they were published in peer-reviewed journals between 2016 and 2026, examined emotion regulation or emotion dysregulation as a central variable, and investigated participants with psychological or psychiatric disorders. Empirical quantitative, qualitative, longitudinal, and intervention studies were considered when they contributed evidence relevant to the review question. Relevant systematic reviews and meta-analyses were consulted to establish the conceptual background and identify potentially important primary studies, but they were not counted among the 12 included empirical articles unless the review protocol explicitly permitted secondary research. Studies were excluded when they did not address emotion regulation, focused exclusively on nonclinical populations without relevance to psychopathology, lacked sufficient methodological information, or were duplicates. This focus reflects research identifying emotion regulation as a process associated with depression, anxiety, substance-related problems, and other forms of psychopathology (Aldao et al., 2016; Naragon-Gainey et al., 2017; Sloan et al., 2017).



The selection process comprised identification, duplicate removal, title and abstract screening, full-text eligibility assessment, and final inclusion. The final review corpus consisted of 12 articles. The selection process was organized according to PRISMA 2020, which recommends reporting the number of records identified, excluded, and retained, together with the reasons for full-text exclusions (Page et al., 2021). Recent reviews were also considered when interpreting the evidence, particularly research on transdiagnostic interventions and emotion regulation across diagnostic groups (Sakiris & Berle, 2019; Antuña-Cambor et al., 2024; Clamor et al., 2026).

Data were extracted from the 12 articles using a structured matrix covering authorship, publication year, research design, participant characteristics, diagnostic category, emotion regulation constructs, measurement instruments, and principal findings. The evidence was synthesized narratively rather than statistically because the studies were expected to vary in design, measures, and clinical populations. Thematic synthesis was used to identify recurring regulatory processes, including reappraisal, suppression, rumination, avoidance, and acceptance, while distinguishing shared patterns from disorder-specific findings. This approach enabled the review to integrate conceptual and empirical evidence without assuming that emotion regulation difficulties operate identically across all psychological disorders.

RESULTS AND DISCUSSION

Result

The reviewed literature indicates that emotion regulation is relevant to the understanding of psychological disorders across multiple diagnostic categories. The evidence encompasses conceptual analyses, systematic reviews, meta-analyses, and intervention-focused research. Across these publications, emotion regulation is examined through several dimensions, including cognitive

reappraisal, expressive suppression, rumination, experiential avoidance, emotional acceptance, and general difficulties in regulating emotional responses. These dimensions provide a framework for understanding how individuals respond to emotional experiences and how regulatory difficulties are associated with psychological symptoms.

Recent meta-analytic evidence provides substantial support for the transdiagnostic relevance of emotion regulation. Clamor et al. (2026) synthesized 649 studies involving 41,590 clinical participants and 36,787 nonclinical controls. Their findings indicated greater emotion regulation difficulties among clinical participants, with a standardized mean difference (SMD) of 1.70. Clinical participants also reported less frequent acceptance (SMD = -0.85), problem-solving (SMD = -0.63), and cognitive reappraisal (SMD = -0.63), alongside greater avoidance (SMD = 1.00), rumination (SMD = 1.51), and expressive suppression (SMD = 0.73). Nevertheless, the magnitude of these differences varied across diagnostic groups, indicating that shared regulatory difficulties coexist with disorder-specific patterns (Clamor et al., 2026).

Similarly, Sloan et al. (2026) included 188 studies representing 563 case-control comparisons across 15 diagnostic categories, with 11,201 clinical cases and 9,609 controls. Their findings showed substantial differences in emotion regulation difficulties between clinical and control groups across the disorders assessed. These results strengthen the evidence that emotion regulation is relevant across diagnostic boundaries, although the findings do not establish that regulatory difficulties are the sole cause of psychological disorders.

Table 1. Synthesis of Literature on Emotion Regulation as a Transdiagnostic Factor

Researcher and year	Focus and method	Main findings
Aldao et al. (2016)	Conceptual review of emotion regulation in psychopathology	Identified emotion regulation as a potentially shared process in the development and maintenance of internalizing and externalizing problems. Emphasized the need for further research on developmental and contextual mechanisms.
Naragon-Gainey et al. (2017)	Meta-analysis of emotion regulation strategies and psychological symptoms	Examined associations between regulatory strategies and depression, anxiety, and substance-use symptoms. Findings supported examining specific strategies rather than treating emotion regulation as a single, undifferentiated construct.
Sloan et al. (2017)	Systematic review of treatment research across anxiety, depression, substance-related, eating, and borderline personality disorders	Reported that emotion regulation difficulties were relevant across several diagnostic groups and that these difficulties could decrease following effective treatment.
Dryman and Heimberg (2018)	Systematic review of expressive suppression and cognitive reappraisal in social anxiety and depression	Highlighted the relevance of both strategies to emotional symptoms and the importance of considering disorder-specific contexts when interpreting their associations.
Sakiris and Berle (2019)	Systematic review and meta-analysis of the Unified Protocol	Examined a transdiagnostic intervention targeting emotional processes. The findings supported further evaluation of interventions addressing processes shared across emotional disorders.
Pedrini et al. (2022)	Systematic review of school-based emotion regulation interventions for adolescents	Reviewed intervention approaches intended to improve emotion regulation. The findings provide developmental context for prevention and intervention research, although adolescent school samples are not equivalent to clinical adult populations.
Antuña-Cambor et al. (2024)	Systematic review and meta-analysis of emotional regulation in emotional disorders and therapy	Examined emotion regulation as a process relevant across emotional disorders, contributing to the evidence base for transdiagnostic conceptualization and treatment.

Shum et al. (2025)	Review of cognitive reappraisal and psychological well-being in early adolescence	Synthesized evidence concerning reappraisal and well-being. This provides developmental evidence about regulation but is not direct evidence that all psychiatric disorders share the same mechanism.
Clamor et al. (2026)	Systematic review and multilevel meta-analysis; 619 studies, 41,590 clinical participants, and 36,787 controls	Found overall emotion regulation difficulties among clinical participants (SMD = 1.70), alongside less acceptance and reappraisal and greater avoidance and rumination. Both shared and disorder-specific patterns were identified.
Sloan et al. (2026)	Systematic review and meta-analysis; 188 studies, 15 diagnostic categories, 11,201 cases, and 9,609 controls	Found significant case-control differences in difficulties measured by the DERS across the 12 disorders analyzed with that scale. Effect sizes ranged from 0.94 for bipolar disorder to 2.55 for borderline personality disorder.
Reents et al. (2026)	Systematic review and meta-analysis of emotion regulation strategy implementation in mental disorders	Examined the implementation and effectiveness of regulation strategies across disorders, extending the question beyond whether regulatory difficulties are present to how strategies function in clinical populations.
Fombouchet et al. (2023)	Theoretical review of emotion regulation and transdiagnostic processes	Contributed to the conceptual discussion of regulatory processes across psychological difficulties. Its theoretical conclusions should be distinguished from effect estimates obtained from primary empirical studies.

Three patterns emerge from the literature. First, difficulties in emotion regulation appear across multiple diagnostic categories. This pattern supports a transdiagnostic perspective in which emotional processes can be investigated beyond the boundaries of individual diagnoses. The findings of Sloan et al. (2017), Clamor et al. (2026), and Sloan et al. (2026) are consistent with this interpretation. Second, regulatory strategies are not associated with psychological difficulties in identical ways. Rumination, avoidance, and suppression were generally more prominent among clinical participants in the large meta-analysis by Clamor et al. (2026), whereas acceptance, problem-solving, and cognitive reappraisal were less frequently reported. These patterns suggest that the assessment of emotion regulation should distinguish between particular strategies and broader regulatory difficulties. Third, the evidence indicates that a transdiagnostic framework should not eliminate diagnostic distinctions. Clamor et al. (2026) reported particularly pronounced patterns involving general emotion regulation difficulties and acceptance in personality disorders, and rumination and reappraisal in depressive disorders. Sloan et al. (2026) also found variation in effect sizes across diagnoses. Accordingly, the reviewed literature supports understanding emotion regulation as a shared area of clinical relevance while recognizing that the degree and form of dysregulation may differ between disorders. Overall, the findings provide conceptual and empirical support for studying emotion regulation as a transdiagnostic factor in psychopathology. However, the predominance of associations in much of the literature means that shared patterns should not automatically be interpreted as evidence of a single causal mechanism. Longitudinal and intervention studies remain important for clarifying whether specific regulatory difficulties precede symptoms, maintain them, or change as psychological conditions improve.

Discussion

The findings of this systematic literature review support the conceptualization of emotion regulation as a transdiagnostic factor in psychological disorders. Across the reviewed literature, difficulties in managing emotional experiences were associated with multiple forms of psychopathology, including depressive, anxiety-related, and personality disorders. This pattern is consistent with the transdiagnostic perspective proposed by Aldao et al. (2016), which emphasizes psychological processes that operate across diagnostic categories. Rather than suggesting that different disorders are identical, the findings indicate that they may share certain difficulties in responding to, interpreting, and managing emotional experiences. Emotion regulation therefore provides a useful framework for examining both common psychological mechanisms and variations in clinical presentation.

The strongest quantitative evidence comes from the meta-analysis by Clamor et al. (2026), which included 619 studies involving 41,590 clinical participants and 36,787 nonclinical controls. The authors

reported an overall standardized mean difference of 1.70 for emotion regulation difficulties. Clinical participants also reported less acceptance ($SMD = -0.85$), problem-solving ($SMD = -0.63$), and cognitive reappraisal ($SMD = -0.63$), alongside greater avoidance ($SMD = 1.00$), rumination ($SMD = 1.51$), and expressive suppression ($SMD = 0.73$). These findings suggest that psychopathology is associated not only with general difficulties in emotional regulation but also with differences in the strategies individuals use. Nevertheless, these standardized differences represent group-level comparisons and should not be interpreted as diagnostic tests or as proof that emotion regulation difficulties independently cause a disorder.

The distinction between adaptive and maladaptive strategies is particularly important. Cognitive reappraisal involves changing how an emotional situation is interpreted, whereas rumination involves repetitive attention to distressing thoughts and experiences. Avoidance may provide temporary relief from uncomfortable emotions but can also limit opportunities to develop more flexible responses. Naragon-Gainey et al. (2017) demonstrated the importance of examining specific emotion regulation strategies in relation to depression, anxiety, and substance-use symptoms. Similarly, Dryman and Heimberg (2018) found that social anxiety was associated with greater reliance on expressive suppression and difficulties using cognitive reappraisal effectively, while depression was associated with reduced use of reappraisal. Together, these findings indicate that the relevance of emotion regulation depends partly on the particular strategy under consideration rather than on a single general measure of regulatory ability.

The transdiagnostic perspective is further supported by evidence concerning treatment. Sloan et al. (2017) reviewed emotion regulation as a treatment construct across anxiety, depression, substance-related, eating, and borderline personality disorders. Their work highlighted the potential value of addressing regulatory processes that are relevant to more than one diagnostic group. In a subsequent systematic review and meta-analysis, Sakiris and Berle (2019) examined the Unified Protocol across 15 studies involving 1,244 participants. They reported substantial reductions in symptoms across several internalizing disorders, alongside improvements in adaptive and maladaptive emotion regulation strategies. These findings suggest that interventions targeting shared emotional processes may benefit individuals presenting with different symptom profiles. However, treatment effectiveness does not by itself demonstrate that emotion regulation is the sole mechanism responsible for symptom improvement.

More recent findings reinforce this interpretation while highlighting diagnostic differences. Clamor et al. (2026) identified particularly pronounced difficulties in emotion regulation and acceptance among personality disorder groups, whereas rumination and reappraisal showed distinctive patterns in depressive disorders. Sloan et al. (2026), in a meta-analysis of 188 studies covering 15 diagnostic categories, also found substantial case control differences in emotion regulation difficulties across the disorders assessed. The variation between diagnostic groups suggests that a transdiagnostic approach should not replace disorder-specific assessment. Instead, clinical formulations may benefit from combining a general assessment of regulatory difficulties with a more detailed examination of the strategies, contexts, and symptoms relevant to each individual.

Evidence concerning changes during psychological treatment also deserves consideration. Antuña-Cambor et al. (2024) reviewed randomized controlled trials examining changes in emotion regulation following psychological interventions for emotional disorders. This research supports examining regulatory change as an outcome of treatment, rather than limiting assessment to symptom reduction alone. Reents et al. (2026) further examined the implementation of emotion regulation strategies across mental disorders and reported that clinical participants could implement such strategies, although their effectiveness was somewhat lower than that of healthy controls. Their findings also highlighted the potential value of prior training and cognitive-change strategies. Taken together, these studies suggest that emotion regulation is not necessarily a fixed deficit; it may be a modifiable process whose effectiveness depends on strategy selection, learning, and clinical context.

Several methodological considerations, however, limit the conclusions that can be drawn. First, studies differ in the measures used to assess emotion regulation, the diagnostic groups examined, and the operational definitions of individual strategies. Second, much of the evidence relies on self-report

and comparisons between clinical and nonclinical groups, which may not establish the temporal direction of the relationship. Emotion regulation difficulties may contribute to the persistence of symptoms, but psychological distress may also interfere with regulatory functioning. Clamor et al. (2026) explicitly identified the need for further research on temporal relationships and additional diagnostic groups. Longitudinal studies, ecological momentary assessments, and intervention studies are therefore necessary to determine how these processes operate in daily life and over the course of psychological disorders.

Overall, the reviewed literature supports emotion regulation as a clinically relevant transdiagnostic process while emphasizing the need to preserve disorder-specific distinctions. The practical implication is not to apply one uniform intervention to every disorder, but to identify shared regulatory difficulties and tailor treatment to individual needs. Future research should use consistent measurement frameworks, include culturally diverse clinical populations, and test whether changes in specific regulatory strategies precede and mediate symptom improvement. Such work could strengthen the evidence for emotion regulation as both an explanatory construct and a potential treatment target in psychological disorders.

CONCLUSION

This systematic literature review indicates that emotion regulation is a transdiagnostic factor associated with various psychological disorders, rather than a process specific to a single diagnosis. Conceptually, difficulties in recognizing, accepting, and managing emotional responses may contribute to the development and maintenance of psychological symptoms across diagnostic categories. Empirically, findings from a 2026 multilevel meta-analysis involving 619 studies, 41,590 clinical participants, and 36,787 control participants revealed substantial emotion regulation difficulties among clinical populations, with an overall standardized mean difference (SMD) of 1.70. The most prominent patterns included increased rumination (SMD = 1.54), experiential avoidance (SMD = 1.00), and expressive suppression (SMD = 0.73), alongside lower acceptance (SMD = -0.85), problem-solving (SMD = -0.63), and cognitive reappraisal (SMD = -0.63). These findings suggest that maladaptive regulatory strategies and limited adaptive strategies are relevant across psychological disorders, although their manifestations and severity may vary by diagnosis. Furthermore, evidence concerning transdiagnostic interventions, including the Unified Protocol, supports the potential value of targeting emotion regulation across diagnostic presentations. Nevertheless, differences in study designs, populations, and measurement instruments limit direct comparisons and causal conclusions. Overall, emotion regulation represents a clinically relevant framework for understanding psychopathology and developing interventions that address shared emotional processes while remaining sensitive to disorder-specific characteristics.

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