

# *The Relationship between Thought Suppression and Psychological Resilience*

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**Abstract:** This study explored the relationship between thought suppression and psychological resilience. Using a questionnaire approach, a survey was conducted on a sample of adults in Gansu Province, utilizing a self-developed demographic questionnaire, the Brief Resilience Scale, and the White Bear Suppression Inventory. A total of 272 responses were collected online and analyzed using SPSS 26.0. The results indicated a significant negative correlation between thought suppression and psychological resilience ( $p < 0.001$ ), with psychological resilience negatively predicting thought suppression ( $\beta = -0.819$ ,  $t = -19.874$ ,  $p < 0.001$ ). Higher levels of psychological resilience were associated with lower levels of thought suppression. These findings suggest that individuals should focus on enhancing their psychological resilience to reduce tendencies for thought suppression, promoting overall mental and physical well-being.

## 1. Introduction

In our daily lives, unwanted thoughts often intrude into our minds, such as the image of a past romantic partner or criticisms from a teacher. These unwanted thoughts can cause distress for individuals and, when severe, may even impact one's mental well-being. To avoid dwelling on these unwanted thoughts, individuals often employ thought suppression as a means to restrain these thoughts [1,2]. Thought suppression refers to the conscious effort of restraining or limiting one's own thoughts or behaviors. This suppression may be in response to external environmental demands or to fulfill internal goals and values [3]. Research has found that during the process of suppression, at times these thoughts not only do not diminish but actually increase compared to when they were not being suppressed; sometimes, despite successfully suppressing these thoughts at a given moment, they may resurface even stronger afterwards. Researchers refer to the former as the immediate enhancement effect and the latter as the post-suppression rebound effect [4-6]. The presence of these effects indicates that thought suppression may not always effectively reduce unwanted thoughts; instead, it could potentially lead to counterproductive outcomes.

Research has linked thought suppression to mental health issues such as anxiety, depression, and decreased self-worth. Thought suppression may result in individuals lacking effective coping strategies when faced with stress and challenges, thereby increasing the risk of mental health

problems [7]. Thought suppression can lead individuals to excessively focus on intrusive thoughts which may exacerbate symptoms of anxiety and depression [8]. Particularly for individuals attempting to avoid or suppress their negative thoughts and feelings, research suggests that thought suppression may lead to emotional disorders such as suppressed desires for eating, avoidance of suicidal ideation and negative emotions which could result in heightened symptom severity [9]. Thought suppression could reflect an individual's susceptibility to psychopathology. In psychological disorders like OCD and post-traumatic stress disorder (PTSD), thought suppression is considered a key maintaining factor. OCD patients may feel guilt and anxiety due to intrusive thoughts such as "I might harm someone," believing that these thoughts increase the likelihood of actions and hold personal responsibility for these thoughts [10]. Thought suppression is associated with difficulties in emotional regulation. For instance, in borderline personality disorder (BPD), thought suppression may mediate the relationship between risk factors and symptom severity. BPD patients might attempt to suppress emotionally-triggering thoughts out of fear of their negative emotions which is a misguided attempt at managing their emotional state [11]. Negative emotions triggered by intrusive thoughts and memories (such as sadness, anxiety, fear) stem from negative evaluations or interpretations of these intrusive thoughts. Employing thought suppression to regulate negative emotions may bring initial short-term relief but often carries long-term adverse effects including increased frequency of intrusive thoughts (rebound effect) and reinforcement of negative evaluations when thought suppression fails (ineffective control) [10]. Moreover, thought suppression may play a role in the pathogenesis and maintenance of specific anxiety disorders like phobias. Individuals with phobias might find themselves distressed by anxiety-inducing thoughts and attempt to suppress them. However, research indicates that efforts to "not think" about specific thoughts can paradoxically lead to the persistence of those very same thoughts. Studies have shown that thought suppression is related to an individual's cognitive control abilities; individuals with higher self-reported cognitive control ability exhibit more severe cue-independent memory deficits during direct inhibition processes indicating individual differences in controlling intrusive thoughts [12]. Cognitive load serves as a catalyst for failed thought suppression – when individuals are under high cognitive load conditions, thought suppression may fail leading suppressed thoughts becoming more frequent and easily triggered [13].

The ironic process theory suggests that the key variable distinguishing successful control from ironic effects is the availability of mental resources. According to this viewpoint, when there are sufficient mental resources to achieve control, psychological control typically operates successfully. However, when for some reason (such as distraction, cognitive load, stress, time pressure, etc.) mental resources are depleted, the expected control not only declines to an uncontrollable baseline or zero level. Instead, psychological control exerted during periods of mental load often produces ironic effects, leading to a state where not only there is "no change" in psychological state but it may even transform into a state opposite to what is desired. For example, expected happiness turns into sadness, expected relaxation turns into anxiety, anticipated interest turns into boredom, and anticipated love turns into hatred, among others [13]. Psychological resilience refers to an individual's ability to effectively cope with and adapt well to adversity, trauma, threats, difficulties, or other significant life stresses. It can be understood at three levels: outcome-based definition: psychological resilience is seen as the favorable outcome of an individual's adaptation and development in the face of severe threats. Process-based definition: psychological resilience is the dynamic process by which individuals swiftly recover and successfully cope with adversity. Quality-based definition: psychological resilience is an individual's capacity to endure destructive changes and recover from negative experiences while flexibly adapting positive psychological qualities or capabilities from adverse experiences [14].

Research has found associations between psychological resilience, mental health, and inhibitory

control in adolescents and young adults. Psychological resilience is linked to better mental health outcomes while a lack of psychological resilience may lead to mental health issues such as anxiety and depression [15]. The research indicated that a lack of psychological resilience might affect individuals' mental health when facing pressures such as the COVID-19 pandemic [16]. Insufficient psychological resilience to cope with adversity can lead to extreme cases of mental illness. Participants with high resilience perceived stress tasks as less threatening compared to those with low resilience. This suggests that positive emotions and cognitive evaluations aid resilient individuals in quickly recovering from negative emotional stimuli [17]. Psychological resilience plays a fundamental role in promoting overall health and well-being. Not only does psychological resilience help confront challenges but cultivating it also offers many benefits across various aspects of life. Physically, psychological resilience assists in reducing the negative impact of stress on the body. Studies show that individuals with higher levels of psychological resilience tend to have lower rates of chronic diseases (such as cardiovascular diseases) and exhibit stronger immune system function. Psychologically and emotionally, psychological resilience serves as a protective factor against developing mental health disorders such as anxiety and depression [17]. Significant correlations have been observed between positive coping strategies and the three components of psychological resilience. Regression analysis indicates that emotional control, self-construction, and coping flexibility components are correlated with positive coping strategies; emotional control appears to be the strongest predictor of positive coping strategies. The findings are consistent with prior research suggesting that students demonstrating better emotional control and coping flexibility exhibit more effective coping strategies when faced with negative psychological issues [18].

In conclusion, extensive research and theories have demonstrated adverse effects of thought suppression on individual mental health issues but have not explored the significant role of psychological resilience in thought suppression. Therefore, this study proposes the following hypothesis: there is a negative correlation between psychological resilience and thought suppression.

## **2. Research Methodology**

### **2.1 Research Participants**

Participants Following the principle of convenience sampling, a portion of adults from Gansu Province were selected as participants. Prior to completing the questionnaires, the participants were informed of the voluntary and anonymous nature of the study. The questionnaires were distributed and collected using the Wenjuanxing platform. A total of 272 questionnaires were collected, with 132 male participants (48.529%) and 140 female participants (51.471%). Among the participants, 214 (78.676%) were from urban areas, while 58 (21.324%) were from rural areas. Additionally, there were 60 only children (22.059%) and 212 non-only children (77.941%).

### **2.2 Research Instruments**

#### **2.2.1 Brief Resilience Scale (Connor-Davidson Resilience Scale-10, CD-RISC-10)**

The measurement of psychological resilience utilized the Brief Resilience Scale developed by Connor and Davidson (2003)[19], revised by Campbell Sills and Stein (2007)[20], and translated by Wang et al. (2010)[21]. This scale consists of 10 items assessing strength and toughness dimensions. Responses are rated on a five-point scale ranging from 0 to 4 (never to always). In this study, the Cronbach's  $\alpha$  coefficient for the CD-RISC-10 scale was 0.944.

### 2.2.2 White Bear Suppression Inventory (WBSI)

The White Bear Suppression Inventory was originally developed by Wegner and Zanakos (1994) [13] and later translated into Chinese by Zhou et al. (2012) [22], who tested its applicability in China. The WBSI is a 15-item self-report questionnaire designed to assess the tendency to suppress thoughts. Participants rate their responses on a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). In this study, the internal consistency coefficient was found to be 0.965.

### 2.3 Data Statistics

Data Analysis Independent samples t-tests, Pearson correlation analysis, and regression analysis were conducted using SPSS version 26.0 for data analysis purposes.

## 3. Results

Table 1: Statistics of basic demography variables and comparison of differences between main variables (N=272)

		N	Psychological Resilience	Thought Suppression
			<i>M</i> ± <i>SD</i>	<i>M</i> ± <i>SD</i>
gender	Man	132	32.061 ±10.574	42.674 ±17.092
	Woman	140	33.586 ±9.994	40.576 ±16.389
	<i>t</i>		-1.223	-1.053
Place of origin	Countryside	58	27.535 ±10.362	49.069 ±16.986
	City	214	34.285 ±9.908	39.542 ±16.117
	<i>t</i>		-4.450***	3.830***
Family formation	Only-child	60	29.950 ±10.102	52.000 ±14.768
	Not-only child	212	34.514 ±9.734	38.623 ±16.098
	<i>t</i>		-5.161***	6.070***

Note: \*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$ ; “p” is the probability, reflecting the probability of an event.

From Table 1, it can be observed that there were no significant differences in Psychological Resilience and Thought Suppression based on gender ( $ps > 0.05$ ). However, significant differences were found in Psychological Resilience and Thought Suppression based on residence and family structure ( $ps < 0.001$ ). Participants residing in rural areas scored significantly higher on thought suppression compared to those in urban areas, while participants from urban areas scored significantly higher on psychological resilience than those from rural areas. Only children scored significantly higher on thought suppression compared to non-only children, whereas non-only children scored significantly higher on psychological resilience than only children.

Table 2: Correlation analysis of main variables (N=272)

	1. Gender	2	3	4	5
2. Place of Origin	-0.003	1			
3. Age	0.122*	0.179**	1		
4. Family Formation	-0.055	0.113	0.355***	1	
5. Psychological Resilience	0.074	0.269***	0.743***	0.305***	1
6. Thought Suppression	-0.064	-0.234***	-0.708***	-0.332***	-0.894***

Note: \*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$ ; “p” is the probability, reflecting the probability of an event.

According to Table 2, there was a significant negative correlation between psychological resilience and thought suppression ( $p < 0.001$ ). This indicates that higher levels of psychological resilience are associated with a lower likelihood of engaging in thought suppression behaviors. Participants' place of origin showed a positive correlation with psychological resilience and a negative correlation with thought suppression ( $ps < 0.001$ ). Age was positively correlated with psychological resilience and negatively correlated with thought suppression ( $ps < 0.001$ ). Family structure exhibited a positive correlation with psychological resilience and a negative correlation with thought suppression ( $ps < 0.001$ ).

Table 3: Regression Analysis of Psychological Resilience and Thought Suppression

Models and Variables	Thought Suppression			
	Model 1		Model 2	
	$\beta$	$t$	$\beta$	$t$
1. Gender	0.011	0.265	0.004	0.145
Place of origin	-0.105	-2.441	0.008	0.278
Age	-0.660	-14.223***	-0.083	-1.995
Family formation	-0.085	-1.869	-0.053	-1.830
2. Psychological Resilience			-0.819	-19.874***
$\Delta R^2$	0.513		0.803	
$R^2$	0.520		0.807	
$F$	72.241***		222.061***	

Note: \*  $p < 0.05$ , \*\*  $p < 0.01$ , \*\*\*  $p < 0.001$ ; “p” is the probability, reflecting the probability of an event.

As shown in Table 3, when controlling for gender, place of origin, age, and family structure in the regression model, it was found that psychological resilience significantly negatively predicted thought suppression ( $\beta = -0.819$ ,  $t = -19.874$ ,  $p < 0.001$ ). Higher levels of psychological resilience were associated with lower levels of thought suppression behavior.

#### 4. Discussion

The study examined the relationship between thought suppression and psychological resilience, and the results indicated a significant negative correlation between thought suppression behavior and psychological resilience among adult individuals. Furthermore, psychological resilience was found to directly negatively predict thought suppression behavior, meaning that individuals with higher levels of psychological resilience exhibit lower levels of thought suppression, which aligns with previous research findings. The results supported the hypothesis.

In various stages of life, adulthood is often seen as a critical period where individuals take on responsibilities, pursue dreams, and strive to realize their self-worth. However, this stage is also accompanied by a series of complex and profound psychological challenges stemming from multifaceted pressures and distress. Adults not only have to deal with the demands of daily work tasks but may also face pressures related to career development bottlenecks, promotion competition, performance evaluations, among others. With the accelerated pace of technological advancements and increasing uncertainty in the workplace environment, challenges such as ongoing skill updates requirements, blurred boundaries between work and personal life, highlight workplace stress more prominently. Prolonged exposure to high-pressure environments can lead to occupational burnout, anxiety, and even depressive emotions [23]. Additionally, adults often bear the significant responsibility of caring for their families, including educating children, taking care of elderly family members, and maintaining family harmony. These responsibilities not only consume a considerable

amount of time and energy but may also bring about financial pressures. Particularly when faced with family tragedies or health issues among family members, the psychological burden significantly increases, leading to feelings of helplessness and an overload of responsibility [24]. Research has also found that adults have complex interpersonal relationship networks encompassing colleagues, friends, partners, and family members among others. Poor management of these relationships, especially in cases of communication barriers, lack of trust or mismatched expectations can lead to conflicts and tension. Long-standing interpersonal issues can deplete individual emotional resources, heightening feelings of loneliness and social anxiety [25]. In an era characterized by globalization and digitalization, social competition has intensified. Whether in terms of educational backgrounds, occupational statuses or social standings - these aspects have become subjects for comparison among people. This pervasive culture of comparison exacerbates individual psychological burdens. Faced with these pressures, adults may unconsciously deploy various psychological defense mechanisms to protect themselves such as repression, projection denial, and thought suppression - however sometimes these mechanisms may inadvertently lead to psychological issues.

Enhancing psychological resilience enables individuals to cope with adversity and challenges in life more effectively, resulting in fewer mental health problems such as anxiety and depression when faced with stressors. Individuals with higher levels of psychological resilience can recover more quickly from trauma and stressors. Psychological resilience helps individuals maintain optimism and hope so they can sustain a positive attitude even during difficult times. It aids individuals in remaining resilient in social interactions and relationships so they can maintain their social networks even in the face of rejection or loss while establishing new connections. In a work setting, psychological resilience assists individuals in overcoming challenges at work leading to increased job satisfaction and professional achievements.

## 5. Limitations and Future Directions

This study was cross-sectional in nature which allows for exploring associations but does not establish causality; future research could employ experimental methods to elucidate the role of thought suppression in psychological resilience more clearly. Additionally, considering individual differences in psychological resilience among different groups could be explored regarding its impact on thought suppression.

## 6. Conclusion

Psychological resilience is negatively correlated with thought suppression behavior; psychological resilience can negatively predict thought suppression. This suggests that enhancing psychological resilience holds significance in reducing excessive use of thought suppression strategies.

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