



Research Paper: The Relationship between Alexithymia and Psychological Well-Being in Pregnant Women



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Abstract

Objective: Over the past two decades, there has been widespread scientific attention to emotion regulation and the impact of emotional dysregulation on physical and mental health. The concept of alexia is rooted in the psychology of emotions and psychosomatic diseases. Many patients with psychosomatic complaints showed problems in emotional self-regulation. This research aimed to explore the association between alexithymia and psychological well-being in pregnant women during their 5th to 7th month of pregnancy.

Methods: The study population consisted of pregnant women from the Mazandaran province, Iran, during 2022-2023. Employing purposive sampling, 200 pregnant women were selected from health centers. Participants completed the Toronto Alexithymia Scale-20 (FTAS-20) and the Psychological Well-being Scale (RSPWB). Pearson's correlation coefficient and regression test were used to analyze the data.

Results: Results revealed an inverse relationship between alexithymia and psychological well-being ($r = -0.388$, $p < 0.01$). Approximately 53% of the variance in psychological well-being scores could be attributed to alexithymia.

Conclusion: In conclusion, alexithymia serves as an effective predictor of maternal psychological well-being.

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1. Introduction

A woman's life journey encompasses pivotal stages that profoundly impact her well-being. Among these, pregnancy stands out as a critical period marked by significant physiological and psychological changes. While motherhood brings joy, it can also be accompanied by pathologic shifts (Littlewood & McGough, 1997). Mental health issues among women of reproductive age contribute to 7% of the overall female disease burden across all age groups (Agampodi & Agampodi, 2013). Pregnancy represents a vulnerable phase during which mental health challenges may surface (Seng et al., 2014). Pregnant women are susceptible to various psychological, emotional, and behavioral stressors (Bales et al., 2015), with depression and anxiety rates threefold higher in this group compared to other women (Kingston et al., 2015). Recognizing that optimal psychological well-being profoundly influences pregnancy progression and fetal development (Guszkowska et al., 2014), prioritizing maternal mental health becomes a public health imperative. Consequently, investigating targeted psychological interventions for pregnant women is essential (Cook et al., 2010).

Psychological well-being is a holistic concept that encompasses positive emotions and effective functioning, as defined by Ryff (Páez Gallego et al., 2020). It involves various dimensions such as self-acceptance, positive interpersonal relationships, mastery of one's environment, autonomy, purpose in life, and personal growth. Extensive research has demonstrated the significance of

psychological well-being, which extends beyond physiological aspects to encompass psychological and social domains. It is strongly associated with both short-term and long-term health outcomes, as well as overall quality of life (Saadeh et al., 2020). The awareness of one's emotions and the ability to express them play a crucial role in social interactions. Emotions, from a cognitive science perspective, are complex sets of information processing-based schemata that involve intricate processes and symbolic representations (Dumitrache et al., 2017). Inadequacy in recognizing others' emotional states and effectively conveying situation-appropriate emotions through written communication is referred to as emotional inadequacy. This includes challenges in identifying and describing emotions, a tendency towards externalizing thinking, limited imaginative capacity, and a deficiency in empathy (Duddu et al., 2003).

Numerous studies have investigated the phenomenon of emotional inadequacy and its impact on mental health. Gonzalez et al. (2021) highlighted that psychological stress arising from everyday life events gradually affects the functioning of various bodily systems, resulting in compromised performance. Abbas Mofrad's research (2021) demonstrated the mediating role of psychological well-being in the association between marital conflicts, emotional security, perceived stress, pregnancy-related concerns, and biological indicators in pregnant women. Similarly, Abbasi et al. (2015) found that emotional inadequacy significantly contributes to exacerbating

decision-making procrastination among students.

The emotional needs of pregnant women encompass various dimensions, including the necessary support and the diverse range of emotions they may experience. Neglecting these needs and failing to address them properly can have detrimental consequences for both the well-being of the mother and the condition of the fetus. Pregnancy is a period of significant physiological and psychological changes for women. Therefore, considering the critical nature of pregnancy and the health of both the mother and the child, prioritizing psychological well-being and welfare, as well as establishing a conducive environment, is of utmost importance. As per the World Health Organization's definition, psychological well-being entails complete physical, mental, and social well-being. Thus, in addition to medical care, pregnant women should also receive guidance from psychologists. Consequently, the present study aims to investigate the relationship between emotional inadequacy and psychological well-being in pregnant women.

2. Method

The present study employed a descriptive-correlational research design. The target population comprised pregnant women in the 5th to 7th month of pregnancy residing in Mazandaran province in the year 2022. Through purposive sampling and by accessing healthcare facilities, a sample of 200 pregnant women was selected to participate in the study. To meet the inclusion

criteria, participants had to be pregnant, free from significant psychological issues, and willing to take part in the research. Following the selection process, strict measures were taken to ensure the confidentiality of participants' information. The research instruments utilized in this study included the Toronto Alexithymia Scale and the Ryff Psychological Well-Being Scale questionnaires, which were administered to the participants. Subsequently, the collected data were analyzed using SPSS software version 24, employing correlation and regression analysis techniques.

2.1. Instruments

Farsi version of the Toronto Alexithymia Scale-20 (FTAS-20): developed by Bagby and Tylore (2000), is a 20-item questionnaire designed to assess alexithymia. It consists of three sub-scales: difficulty identifying feelings, difficulty describing feelings, and externally-oriented thinking. Respondents rate each item on a five-point Likert scale, ranging from 1 (completely disagree) to 5 (completely agree). A total score is calculated by summing the scores of the three sub-scales, providing an overall measure of alexithymia. Higher scores indicate higher levels of alexithymia, with a maximum score of 100 and a minimum score of 20. A cut-off points of 50 is commonly used. In Besharat's study (2009), the scale demonstrated good reliability, with a Cronbach's alpha coefficient of 0.85, and validity was established through correlation analysis with an emotional intelligence scale, yielding a coefficient of 0.80.

Ryff's Scales of Psychological Well-Being (RSPWB), developed by Ryff in 2006, comprises 18 items that assess six dimensions of well-being: self-acceptance, positive relations with others, autonomy, purpose in life, personal growth, and environmental mastery. Respondents rate each item on a six-point Likert scale, ranging from 1 (completely disagree) to 6 (completely agree). Higher scores reflect higher levels of psychological well-being. In Ryff's study (2006), the validity of the scale was supported by correlation analysis, yielding a coefficient of 0.87. The scale also demonstrated good reliability, with an internal consistency coefficient of 0.90.

3. Results

This research study was conducted on a sample of 200 pregnant women in the 5th to 7th month of pregnancy in Mazandaran province. Among the participants, 35 respondents (16.9%) fell within the age range of 20-25 years, 79 respondents (38.2%) were between 25-30 years old, and 86 respondents (41.5%) were between 30-35 years old.

Table 1 presents the mean and standard deviation of the participants' scores on the Toronto Alexithymia Scale and its subscales, including difficulty identifying feelings, difficulty describing feelings, and externally-oriented thinking. Additionally, the table showcases the scores on the Ryff Psychological Well-Being Scale and its sub-dimensions, encompassing self-acceptance, positive relations with others, autonomy, purpose in life, personal growth, and environmental mastery.

Table 1

Average Scores and Variability in Emotional Inefficiency Dimensions and Psychological Well-Being among Pregnant Women

Factors	Mean	Standard Deviation
Difficulty in Identifying Emotions	5.14	8.4
Difficulty in Describing Emotions	8.9	9.3
Concrete Thinking	6.16	7.5
Emotional Inefficiency (Total Score)	4.41	33.11
Self-Acceptance	7.10	8.1
Positive Relationships with Others	3.11	6.2
Autonomy	5.13	3.2
Purposeful Life	9.9	39.2
Personal Growth	18.11	88.1
Mastery of Environment	80.11	43.2
Psychological Well-being	8.91	16.17

Table 2 shows alexithymia and Psychological Well-Being Correlation.

Table 2

Relationship Between Emotional Resilience and Psychological Well-Being

	Self-Acceptance	Positive Relationships with Others	Autonomy	Mastery of Environment	Purposeful Life	Personal Growth	Total
Difficulty in Identifying Emotions	-0.066**	-0.191*	-0.238*	-0.188**	-0.512*	-0.39*	-0.28**
Difficulty in Describing Emotions	-0.34**	-0.21*	-0.53*	-0.28*	-0.63**	-0.47**	-0.77*
Concrete Thinking	-0.71*	-0.39**	-0.41*	-0.36**	-0.09*	-0.32*	-0.15**
Total	-0.399**	-0.467**	-0.723**	-0.521**	-0.388**	-0.325**	-0.388*
	P<0.01	P<0.05					

The data reveals an inverse relationship between alexithymia and psychological well-being ($r = -0.388$, $p < 0.01$), suggesting that

as alexithymia increases, psychological well-being decreases.

Table 3

Predicting Psychological Well-Being via Alexithymia Regression Analysis

Criterion Variable	Predictor Variable	Correlation Coefficient R	Coefficient of Determination R2	F	B	t
Psychological Well-Being	Alexithymia	0.538	0.53	64.65	-0.18	-7.33

P=0.0001

Table 3 presents the findings from a regression analysis aimed at predicting alexithymia using psychological well-being scores. Based on the data in this table, approximately 53% of the variability in psychological well-being scores can be explained by alexithymia scores, indicating that alexithymia provides a reasonably

effective prediction of psychological well-being.

4. Discussion

The findings of this study highlight a significant association between emotional distress and psychological well-being among pregnant women. Specifically, lower levels

of emotional distress correspond to higher levels of psychological well-being. These findings are consistent with prior research conducted by [Gonzalez et al. \(2020\)](#), [Abbas Mofrad \(2021\)](#), and [Abbasi et al. \(2014\)](#).

To provide further insight into these results, it can be argued that emotional distress is indicative of challenges in emotional self-regulation and difficulties in cognitive processing of emotional information and emotion regulation ([Bagby and Taylor, 2000](#)). When individuals face obstacles in the cognitive processing, perception, and evaluation of emotional information, they experience emotional and cognitive turmoil and distress. This inability disrupts the organization of emotions and cognitions and predisposes individuals to adopt less effective coping mechanisms in the face of stressful situations, ultimately compromising their psychological well-being ([Beshaarat, 2009](#)).

Pregnant women may be particularly susceptible to emotional distress due to the hormonal and mood changes associated with pregnancy. Consequently, they may exhibit a tendency to avoid direct engagement with stressful circumstances, which subsequently diminishes their problem-solving capabilities. Consequently, they experience cognitive and emotional turmoil, leading to a decline in their psychological well-being ([Zeidner & Endler, 1996](#)).

In addition, inadequate regulation and management of emotions are characteristic features of emotional distress ([Bagby & Taylor, 2000](#)). This emotional distress poses a threat to the mental health of pregnant

women, resulting in reduced psychological well-being and heightened psychological distress. Moreover, it negatively impacts their interpersonal interactions, communication skills, and coping strategies. Conversely, a reduction in emotional distress empowers pregnant women with problem-focused problem-solving abilities and better equips them to handle stressful situations. This enhanced capacity, accompanied by mental and emotional tranquility, fosters their potential and promotes psychological well-being. The ability to regulate and manage emotions, as opposed to experiencing emotional distress, strengthens mental health at an individual level by mitigating psychological distress and enhancing psychological well-being. Furthermore, it exerts a positive influence on interpersonal interactions, communication skills, and coping strategies ([Besharat, 2009](#)).

The current study was subject to certain limitations. One such limitation was the exclusive focus on pregnant women, which limits the generalizability of the findings to the broader population. Therefore, it is advisable for future research to encompass other individuals to enhance the applicability of the results.

5. Conclusion

In light of the study's findings, it can be concluded that psychological well-being plays a significant role in predicting emotional distress.

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Conflicts of Interest

The author affirms that there are no conflicts of interest.

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