

Emotion Regulation Skills with the Changing Perception of Happiness in the Pandemic¹

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Abstract

In the present study, the purpose was to determine the happiness perceptions of the students who returned to school after the Covid-19 pandemic prohibitions from the beginning of the semester to the end of the semester, to examine their adaptations in the process, and to examine whether the emotion regulation skills of the students affected the hedonic adaptation situation. The study was conducted in the mixed model, Convergent Parallel Design, in the case study design in the qualitative dimension, and descriptive research design in the quantitative dimension. The study group, which was determined with the Snowball Sampling Method, consisted of 24 students. The Emotion Regulation Skills Scale and Interview Form were used as the data collection tools. The results of the study show that emotion regulation skills have a positive effect on the hedonic adaptations of students and positively affect their perceived happiness levels.

Keywords

Covid-19
perception of happiness
emotion regulation skills
hedonic adaptation
mixed method

About Article

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Pandemide Değişen Mutluluk Algısı ile Duygu Düzenleme Becerileri

Öz

Bu araştırmada Covid-19 pandemi yasakları sonrası tekrar okula dönen öğrencilerin dönem başından dönem sonuna doğru değişen mutluluk algılarını belirlemek, süreç içerisindeki adaptasyonlarına bakmak ve hedonik adaptasyon durumuna öğrencilerin duygu düzenleme becerilerinin bir etkisi olup olmadığını incelemek amaçlanmıştır. Çalışma karma modelde, yakınsayan paralel desende, nitel boyutta durum çalışması ve nicel boyutta tanımlayıcı araştırma olarak yürütülmüştür. Araştırmanın çalışma grubu kartopu örnekleme yöntemi ile belirlenmiş ve çalışmaya toplam 24 öğrenci katılmıştır. Veri toplama araçları olarak Duygu Düzenleme Becerileri Ölçeği ve Görüşme Formu kullanılmıştır. Araştırma sonuçları duygu düzenleme becerilerinin öğrencilerin hedonik adaptasyonları üzerinde olumlu yönde etkili olduğunu ve algıladıkları mutluluk seviyelerini de pozitif etkilediğini göstermektedir.

Anahtar Sözcükler

Covid-19
mutluluk algısı
duygu düzenleme becerileri
hedonik adaptasyon
karma yöntem

Makale Hakkında

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Introduction

The World Health Organization (WHO) classified the Covid-19 outbreak as a pandemic on March 11, 2020 (WHO, 2020). Many places such as businesses, shops, restaurants, schools, and entertainment facilities were temporarily closed and serious public life restriction measures were taken in many countries of the world to slow the spread of the virus. Quarantine processes were implemented and prohibitions were imposed on leaving homes. All these restrictions and prohibitions, the process of adapting to new living conditions, and coping with the unknown caused serious psychological stress in individuals (Altena et al., 2020; Folk, Okabe Miyamoto, Dunn, & Lyubomirsky 2020; Holmes et al., 2020). Many people reported that their stress, anxiety, and depression levels increased during this period (Choi, Hui, & Wan, 2020; Roy et al., 2020; Twenge & Joiner, 2020; Wang et al., 2021; Yiğitoğlu, H. Karadede, Ö. Karadede, Karaali, & Aydın 2021). It has also been determined that living in pandemic conditions causes symptoms of post-traumatic stress disorder (Bo et al., 2021; Qi et al., 2020; Tarsitani et al., 2020; Wesemann et al., 2022).

As humans adapt rapidly to sensory and physiological changes, they are also very talented in adapting and becoming used to difficult conditions during wars, pandemics, and the things that give them pleasure. This is defined as hedonic adaptation in the literature, and aside from the negative aspect of destroying the feeling of happiness after positive events, and if the changes are bad, it turns into a great chance for human beings (Lyubomirsky, 2019). Hedonic adaptation has evolutionary advantages mainly because it motivates individuals to focus on new stimuli or changes in their environment. Because staying in intense emotional states, no matter positive or negative, for long periods can be overwhelming and disrupt healthy functioning. What is called hedonic adaptation brings people back to the level of well-being they had before the event that caused this emotion. It is worth mentioning the concept of the set point here. An individual's level of well-being, which includes both positive and negative emotional processes and cognitive processes such as life satisfaction, is defined as subjective well-being, and previous studies show that this level remains relatively consistent throughout an individual's life. According to the set point theory, although the subjective well-being levels differ for each individual and may temporarily increase or decrease with life changes, it is expected that eventually, everyone will return to their setting point (Okabe Miyamoto & Boehm, 2020). Previous studies showed that we are as successful as our hedonic adaptation ability in reverting to negative life events such as diseases, accidents, and wars (Lyubomirsky, 2019). Studies also reported that three main factors affect the happiness level

of individuals, deliberate activities that include genetics, living conditions, and behaviors targeted to increase happiness (Lyubomirsky, Sheldon, & Schkade, 2005). In other words, although the subjective well-being level is largely genetically based, an individual's happiness level can vary (Fujita & Diener, 2005; Lyubomirsky, 2019; Okabe Miyamoto & Boehm, 2020). Hedonic adaptation occurs in the context of both positive and negative experiences. Although people cannot escape from negative experiences, their traits and social-emotional skills affect their adaptation processes (Gilbert, 2018; Gubler, Makowski, Troche, & Schlegel 2021; Lyubomirsky, 2019).

Emotions are processed in the limbic system of the brain, and this system continues to function independently (Carter, 2012). For this reason, it is very difficult for an individual to control and regulate their emotions voluntarily. However, although the individual cannot control what s/s/he feels and when, s/he can control what will happen afterward and regulate how long s/he will feel this emotion and what s/he will do with this emotion (Greenberg, 2018). They can do this with emotion regulation skills, and they can cope with their negative experiences more easily with these skills and choose to feel better and happier (Gilbert, 2018).

In general, emotion regulation skills involve awareness, identification and naming, understanding, confrontation, acceptance, tolerance, empathy, change, and self-support skills (Berking & Whitney, 2018; Cesur Soysal & Öncel Ari, 2020; Southam Gerow, 2014). Knowing one's own and other's emotions is emotional awareness. Recognizing and allowing to experience (confronting) emotions is important for continuous well-being because all emotions are functional and tell the individual their needs. If individuals realize and can name the emotion they feel, they can determine the right strategies they need to regulate their emotions (Berking & Whitney, 2018). Also, at this point, an individual should be able to synthesize his/her emotions with cognition and identify the reasons for these emotions (Greenberg, 2018), which is a skill that enables his/her strategies to be effective. Coping with emotions with effective strategies is necessary to improve well-being (Barrett, Gross, Christensen, & Benvenuto 2001). Empathy, which is defined as understanding the emotion of the other and giving an appropriate emotional response to this emotion, is extremely important for establishing healthy relationships (Zoll & Enz, 2005). The ability to change, which involves changing the quality, intensity, and duration of the emotion in the desired way, is a very difficult skill. Because changing some emotions is very difficult or even impossible. In such cases, it is necessary to accept the existence of these emotions and to be able to stay with these intense emotions by tolerating them (Vatan & Oruçlular Kahya, 2018).

The final emotion regulation skill, self-support, includes two elements. This skill, which includes self-worth and regular attention to oneself by being involved in activities leading to positive emotions, can generally be defined as the ability to support oneself in a compassionate way (Southam Gerow, 2014). Studies show that people who have weak emotion regulation skills feel lonelier and have weaker social ties (Butler et al., 2003; Gross & John, 2003; Srivastava, Angelo, & Vallereux, 2008) and experience more psychological stress during the Covid-19 prohibitions (Gubler et al., 2021; Stieger, Lewetz, & Swami 2021; Wang et al., 2021).

It is extremely important that child development specialists (See CUCEP, 2016), who are on the team to support children and their parents in pandemics and natural disasters, etc., are active in their emotion regulation skills. As Levine and Frederick (2020) reported, it will not be effective in situations where the counselor faces situations such as restlessness, anxiety, and incompatibility, even if the consultant has all the information about the problem and takes the necessary initiatives. If the counselor is far from his/her feelings, s/he cannot cooperate with the client, cannot reach the client, and may leave him/her alone. As a result of the failure to establish a therapeutic relationship, the support process loses its effectiveness. Child development specialists who gain awareness and mastery of emotion regulation skills can better analyze their cases, establish therapeutic relationships, and manage support processes more effectively. It is considered that if the child developer can create a change in his/her happiness level and accelerate his/her hedonic adaptation, s/he can assume the role of a guiding consultant for the child s/he will support and his/her parents.

In light of this information, in the present study, the purpose was to determine the changing happiness perceptions of the child development department students who returned to school after the Covid-19 pandemic prohibitions, to evaluate their adaptations in the process, and to examine whether the emotion regulation skills of the students affected the hedonic adaptation state.

Method

Study Pattern and Study Group

The present study was conducted in the mixed model and Convergent Parallel Design (QUAN+QUAL), in the case study in the qualitative dimension, and the descriptive study design in the quantitative dimension. The data were collected simultaneously but separately from each other. One is not based on the results of the other and is equally important for the study results. The reason for choosing the method was to create an umbrella paradigm by

comparing and contrasting quantitative statistical results with qualitative findings to support and verify the process (Creswell & Plano Clark, 2011).

The study group, which was determined with the Snowball Sampling Method, consisted of a total of 24 students who volunteered to participate in the study, studying in the 3rd and 4th grades of the Child Development Department of a university in the northwest region of Turkey. The participants were given detailed information on the study and its purposes and written informed consent was given to those who volunteered to participate. The mean age of the study group which consisted of 19 women and 5 men was 22.54 (Min=20, Max=28). The study inclusion criteria are given below.

Being a Child Development Department 3rd/4th Grade student (the purpose was to exclude the effect of emotional factors such as extra excitement, joy, or stress, which may be caused by the study group having received face-to-face education at the university for at least one semester and coming to university for the first time, on their perception of happiness).

Not having attended training on emotion regulation before.

Informed Consent

(1) Consent to Participate-Informed consent was obtained from all individual participants included in the study.

(2) Consent to Publish-Participants provided informed consent for publication of their de-identified data.

Data Collection Tools

Emotion regulation skills scale. This 5-point Likert-type scale was developed by Berking and Znoj (2008) and was adapted into the Turkish language by Vatan and Oruçlular Kahya (2018). The scale has 27 items and 9 sub-dimensions (awareness, body sensations, clarity, understanding, acceptance, tolerance, preparation for confrontation, self-support, and change) that are rated in the range of “0: Almost never, 4: Almost always”. The Cronbach’s Alpha Values of the sub-dimensions ranged between 0.49-0.75 and was 0.89 for the whole test (Vatan & Oruçlular Kahya, 2018).

Interview form. The relevant literature was reviewed to determine the situations to be measured before the form was developed (Altena et al., 2020; Folk et al., 2020; Gilbert, 2018; Gubler et al., 2021; Holmes et al., 2020; Lyubomirsky, 2019; Stieger, 2021; Vatan & Oruçlular Kahya, 2018; Wang et al., 2021). A total of five questions were prepared in the semi-structured interview form that was developed by the researcher to examine the changing

happiness perceptions of the participants who returned to school after the Covid-19 pandemic prohibitions from the beginning of the semester to the end of the semester and to determine their adaptations in the process. The opinions were received from three faculty members who worked in the Child Development Departments of universities and hold the title of the doctor regarding the face validity of the interview form. Faculty members have studies in the fields of emotion regulation and mental health. The open-ended questions, which were considered to be included in the interview form, were organized by the experts for clarity and suitability for the study purpose.

Limitations

The study was limited to the questions in the measurement tools and the qualities it measured and the answers given by the students of the child development department to these questions. Also, the data were affected by how accurately the students remembered and conveyed their past feelings because some study data were obtained retrospectively.

Data Collection

The quantitative data were collected by the researcher in groups in the classroom setting. The qualitative data, on the other hand, were recorded in writing on the forms by the researcher in the face-to-face interviews individually. Then, the participants read these recordings and were asked to give their consent. All the data were collected between January and February 2022.

Analysis of Data

Analysis of quantitative data. Descriptive statistics were used in the analysis of quantitative data. Although statistics such as frequency, percentage, and mean were obtained for the sub-dimensions of the scale, descriptive statistics of the total scores of emotion regulation skills were used in the study.

Analysis of qualitative data. The qualitative data were evaluated with the content analysis technique. The analysis was completed in four steps: (1) Encoding the data, (2) Finding the themes, (3) Organizing the codes and themes, and (4) Interpreting the findings. The researcher read the datasets several times and encoded them. The encodings were created with the Inductive Analysis Technique according to the concepts extracted from the data (Merriam, 2015).

Within the framework of Parrott's Classification of Emotions, themes were created from the codes. Parrott (2001) defined a total of 146 emotions, six of which were primary

emotions, and s/he stated that they customize each other. Secondary emotions customize primary emotions, and tertiary emotions customize secondary emotions (e.g., the secondary emotion longing includes the primary emotion love, and longing includes the tertiary emotion, desire). Within the framework of Parrott’s Classification, the emotions expressed by the participants were collected under the primary emotions of “joy, anger, sadness, and fear”. The emotions defined by the participants and the themes created from these emotions are given in the table below (Table 1).

Then, the thematic encoding was performed by the researcher by finding common aspects between the codes, and themes were created. An expert in research data analysis and a Ph.D. degree expert was consulted at this stage to ensure internal and external consistency for the security of data analysis (Yıldırım & Şimşek, 2016), and the codes and themes were edited in line with recommendations. The findings were interpreted by including the direct opinions of the participants by sticking to the original form of the data (Wolcott, 1994). The names of the participants were encoded as P1, P2, ... so that the direct quotations did not reveal their identity, and the real names of the participants were kept confidential.

Table 1

The Codes Extracted from the Expressions of the Participants and the Emotion Themes Developed in This Regard

Place of the Emotions Expressed in Parrot’s Classification (Code) - Secondary/Tertiary Emotion -	The counterpart of the Primary Emotion in Parrot’s Classification (Theme) - Primary Emotion -
Excitement, Happiness, Relaxation, Contentment	Joy
Boredom, Dislike, Frustration	Anger
Hopelessness, Disappointment, Unhappiness,	Sadness
Worry, Anxiety, Boredom, Tension, Anxious, Bored	Fear

Results

The quantitative and qualitative findings obtained in the study are presented in tables in this section.

Table 2

The Descriptive Statistics of the Emotion Regulation Skills Scale Scores of the Study Group

Sub-dimensions	N	Min.	Max.	\bar{x}	SD
Paying Attention to Emotions	24	.67	4.00	2.5972	.74846
Bodily Perception of Emotions	24	.67	4.00	2.6250	.65432
Clarity About Emotions	24	1.33	4.00	2.7778	.74644
Understanding Emotions	24	1.33	4.00	2.8611	.75448
Accepting Emotions	24	.67	3.67	2.1250	.70753
Endurance	24	.67	3.33	2.2222	.73994
Preparing for Confrontation	24	.67	3.00	2.0833	.61581
Self-Support	24	.67	4.00	2.7500	.94919
Change	24	1.33	3.33	2.2778	.61907
Total: Emotion Regulation Skills	24	1.67	3.30	2.4938	.39328

The maximum and minimum scores, averages, and standard deviations of the participants received in the sub-dimensions of the Emotion Regulation Skills Scale are given in Table 2. When the table is examined, the sub-dimension that had the lowest average of the participants is Preparation for Confrontation (\bar{x} =2.0833), and the sub-dimension with the highest average is Understanding Emotions (\bar{x} =2.8611). When the “Total: Emotion Regulation Skills Sub-Dimension Scores”, which evaluated the emotion regulation skills of the participants in general is evaluated, it is seen that their average is 2.49 ± 0.39 . The scores from the sub-dimension are between 1.67-3.30.

Table 3

The Total Scores of the Study Group Received in the Emotion Regulation Skills Scale and their Emotional Changes during the Process

Participant's code	Total: ERS sub-dimension scores	Emotions during the pandemic period				Emotions felt when imagining returning to school				Emotions felt when it became definite that schools would open				Emotions felt in the third month of schools				How did they think they would think? How do they feel now?
		J	A	S	F	J	A	S	F	J	A	S	F	J	A	S	F	

K1	3.30																J→J
K2	3.26																J→J
K3	3.22																J→J
K4	3.11																J→J
K5	2.59																J→J
K6	2.59																F→F
K7	2.59																J→J
K8	2.59																J→J
K9	2.56																J→F
K10	2.52																J→F
K11	2.48																J→S
K12	2.41																J→F
K13	2.41																J→J
K14	2.41																J→F
K15	2.37																J→S
K16	2.37																J→F
K17	2.30																J→J
K18	2.26																J→S
K19	2.26																J→S
K20	2.19																J→F
K21	2.19																J→J
K22	2.15																J→F
K23	2.07																J→S
K24	1.67																J→S

LDB: Emotion Regulation Skills, J: Joy, A: Anger, S: Sadness, F: Fear

The general emotion regulation skill scores of the participants and the emotion themes formed from the answers given to the qualitative questionnaire are given in Table 3. The

participants first described the emotions they experienced during the pandemic process and then they expressed how they felt when they imagined that the pandemic prohibitions ended and face-to-face education was started again. Later, they explained their feelings when it was officially announced that the prohibitions would end. Finally, they shared how they felt at the end of the three months they spent in face-to-face education. The participants were also asked to describe how they considered their feelings would be during the process, and how they felt now. When the table is examined, it is seen that as the scores of emotion regulation skills decrease, the joy-theme emotions that the participants considered they would feel, and when the process became official, were replaced by anger, sadness, and fear-theme emotions in three months. It is seen that the participants who scored high in emotion regulation skills were able to maintain the joy-theme emotions they considered they would feel and expressed what they felt when the process became official even after three months.

P1 described his/her feelings during the pandemic process as follows: *When the prohibitions started, I panicked. I was worried about why this happened, how many months it would take, and whether we would be infected with the virus. I was very afraid to go out. I was full of fear of losing my family.*

P3 said *I did not have much difficulty, I felt good because I am a home-loving person. But being at home out of necessity made me feel very overwhelmed after some time, I became bored.*

P14 said *People used to announce from the mosques that we must not go out and put on our masks all the time in the city where I was at the beginning of the pandemic. It made me extremely nervous; it made me feel bad to hear these warnings all the time. I felt extremely depressed towards summer. And I started to worry about the future.*

When asked how s/he felt when s/he dreamed that one day the pandemic prohibitions would become flexible and s/he would return to school, P4 expressed his/her feelings as follows: *Dreaming about this and dreaming of going back to university gave me a sense of peace and relaxation. I would be more active; it made me feel good to think that I would meet one-to-one with my teachers and friends.*

P15 said *I completely gave up hope after two semesters went online. Because I saw that schools were closed during the school period, everywhere was closed. They said that they were doing this for education and our health: It was bullshit. As soon as summer came, everywhere opened, and tourism took off. People lived without rules. When the winter came, it was said that 'the cases increased, the schools continued to the online system'. I had*

conditioned myself to go on like this by saying that this time would go on like this, it would not get any better, once the ship had flooded.

P20 said, *I knew that I would feel happy to be together with my friends again. I also had concerns about the precautions to be taken. I could not find a clear answer by comparing the positive and negative sides.*

When asked how they felt when it became official that schools would switch to face-to-face education after the pandemic prohibitions, K7 expressed his/her feelings as follows: *I felt like I was coming out of a cage. It was like going to my own home, my order, and where I truly belonged. I experienced an inner peace that I had not experienced in a very long time.*

P11 said *I felt extremely unprepared and vulnerable. I considered I had to keep up with something. Even the thought of not being able to go to school with the weight I gained during the pandemic was stressing me and making me feel ashamed of myself. I used to eat myself up in case my friends said 'you have gained a lot of weight' or if they said things like this to me when I had missed them so much. I, who wanted schools to be opened at first, started to wish that I had finished school with distance education. Because the disease was still going on and we were at risk in this way. I was worried about the thought of 'What if I get Covid?'.*

P16 expressed his/her feelings stating that, *I was very excited. I wondered what the new order would be like. Since I had not been to school for a year and a half, I wondered how it would be. Whether I was happy or excited, unfortunately, my worries continued. I was worried. After all, the disease continued.*

When asked about their feelings at the end of the three-month face-to-face education process, P5 said, *I feel much happier and more active during the face-to-face education process* and P8 said, *It was not easy to adapt again, but I had missed that life where I had to achieve something on my own. My only doubt was how to focus on the lessons and how to start studying. I had some concerns regarding this. It was a process dominated by happiness, but of course, I was also worried.*

P19 said *I was happy when it became clear that face-to-face education would start. I thought everything would be fine. But it did not do me any good. I was not feeling well; it did not turn out the way I considered it would.*

P22 said *Being with my friends made me feel good. I was more motivated. But becoming used to the process again made me tired. Sometimes I become overwhelmed.*

Finally, when the participants were asked to describe how they thought their feelings would be during the process, but how they felt later, P1 said, *I wanted the school to open so much that I believed that I would be very happy. Now I really cannot wait to see it. It was just as I imagined, it worked very well for me. Nothing is left behind from my depressive mood at home. This is like my home, maybe it is ridiculous, but I feel very peaceful here.*

P4 said *In general, I felt unhappy while I was in the distance education process. When I learned that face-to-face education would begin, I was very happy on the one hand, but on the other hand, I was also nervous of course. I felt much more relaxed and happy then. I was where I wanted to be and with the people I wanted to be. What else would I desire?*

K9 said *I felt an unexpected feeling. I came here so excited, but I had a hard time, it seemed like everything disagreed with me. Despite staying in the dormitory for so many years, this time I had a hard time, with the noises, the queue in the cafeteria, having to get ready to go to school... Everything disturbed me. I do not know; it was like I was exhausted. I did not think that such a difficult road awaited me, I came with different expectations.*

P15 stated, *In the process, I experienced a little bit of every emotion, momentarily. Sometimes I became hopeless and full of hope. I was both happy and angry... Depending on the situation, they all happened to me one by one. Because it was always full of surprises. The feeling of uncertainty always brought unexpected things. I also lived in the moment. Where I was then was an utter disappointment. It should not be like this. I looked at my life, my future, and everything with hopelessness. I tried to live my life expectations below zero. However, being young should not mean anything like that. This life has exhausted me.*

P24 said *Of course, there were differences in my feelings. Because although I was in the distance education process, I always dreamed of the day we would switch to face-to-face education. When we switched to face-to-face education, I started to worry in a way that I could not understand. Frankly, the process was not like I had expected. I cannot be happy in a way that I cannot always make sense of. I cannot find the reason for my mood change.*

Discussion, Conclusion, and Recommendations

The present study aimed to determine the changing happiness perceptions of the child development department students who returned to school after the Covid-19 pandemic prohibitions, from the beginning of the semester to the end of the semester, to examine their adaptations in the process and to examine whether the emotion regulation skills of the students affected the hedonic adaptation. The results of the study showed that the emotions of the participants during the pandemic process mostly included the primary emotions of sadness

and fear. In line with the literature data, the participants also said that all the restrictions and prohibitions during the pandemic process stressed them, and they felt hopeless, anxious, and depressed (Altena et al., 2020; Choi et al., 2020; Folk et al., 2020; Holmes et al., 2020; Roy et al., 2020; Twenge & Joiner, 2020; Wang, et al., 2021; Yiğitoğlu et al., 2021). Studies that investigated the emotions of individuals during the Covid-19 prohibitions with their emotion regulation skills also obtained findings in parallel with our study results. The results of these studies showed that individuals who had poor emotion regulation skills were lonelier and experienced anxious and stressful emotions (Butler et al., 2003; Gross & John, 2003; Gubler et al., 2021; Srivastava et al., 2008; Stieger, 2021; Wang et al., 2021).

In the study, it was found that the majority of the participants said that they felt the primary feeling of joy when they dreamed that the prohibitions ended and the schools were opened again. With the official announcement that the prohibitions would end and schools would be opened, joy and fear were seen intensely as primary emotions when how they felt was considered. When the emotions the participants felt after the face-to-face education at their school for three months were examined, it was found that the primary intense emotions were again joy and fear. However, the interesting point of the study was that as the emotion regulation skills of the participants decreased, it was seen that their joy-themed emotions were replaced by anger, sadness, and fear-themed emotions in three months. It was also found that the participants who scored high in emotion regulation skills were able to maintain joy-themed emotions after three months. The findings of the study showed that emotion regulation skills had positive impacts on the hedonic adaptations of students and affected their perceived happiness levels positively. The findings support the literature data (Fujita and Diener, 2005; Gilbert, 2018; Gubler et al., 2021; Lyubomirsky, 2019).

All participants said that they would be relieved and happy when the prohibitions ended during the pandemic process. Of course, although the presence of the virus still triggers some anxieties, the primary emotions expressed by the participants to this anxiety and concern were joy-themed feelings. However, within three months after the prohibitions were lifted, the emotions felt by almost two-thirds of the participants (those with lower emotion regulation scores) evolved into secondary and/or tertiary emotions such as anxiety, distress, and tension, which are collected under the umbrella term of primary emotion of fear. These results of the study support the set point theory (Okabe Miyamoto & Boehm, 2020; Lyubomirsky, 2019). It also shows that although the individual setting point, in other words, the subjective well-being level, is largely genetically based, there may be changes in the

happiness levels of individuals (Fujita & Diener, 2005; Lyubomirsky, 2019; Okabe Miyamoto & Boehm, 2020). By evaluating the results of the current study, it may be possible to positively change the satisfaction, well-being, and happiness of people by supporting their emotion regulation skills. Gilbert (2018), Gubler et al., (2021), and Lyubomirsky (2019) reported that the social-emotional skills of individuals affect their adaptation processes.

It is extremely important that child development professionals, who are included in the team to support children and their parents in situations such as pandemics and natural disasters, are active in their emotion regulation skills. Establishing a connection with emotions and correct empathy would play key roles in the bond to be established between the counselor and the client when faced with situations causing feelings of restlessness, anxiety, and incompatibility (Levine & Frederick, 2020). The development specialist should enable the child and family to be able to recognize, accept and make sense of the emotions they feel in the face of these experiences, and then create their coping strategies (Field, Jones, & Russell Chapin 2017; Greenberg, 2018). To achieve this, the individual must first use these skills effectively in his/her life. Firstly, s/he should have an idea about his/her feelings, convey his/her feelings to the client, and empathize with him/her, but stay calm and controlled by eliminating his/her emotional intensity. Only then, can a healthy therapeutic relationship be established and the support the child and parents require provided. The more the child development specialist can create a change in his/her happiness level and accelerate his/her hedonic adaptation, the more s/he would be able to assume the role of a guidance counselor for the child s/he would support and his/her parents.

The findings of the study show that emotion regulation skills have positive impacts on the hedonic adaptations of students and affect their perceived happiness levels positively. According to this result, the following recommendations can be given to experts and researchers working in the field.

When the importance and necessity of emotion regulation skills are considered, both individually and professionally, for child development professionals and other professional groups working in all three stages of health services, it is considered that it is important to include courses aiming to develop and support these skills as a compulsory course in the curricula of the relevant departments of universities.

Also, in the scope of protective and preventive activities of healthcare services, education on emotion regulation skills should be expanded in a way that individuals of all ages and socio-cultural levels can access. In this way, with the increased coping capacity of

people, it can be ensured that they can eliminate risky situations with their efforts and minimum negative effects.

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