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A Comparative study on the Psychological Consequences of Emotional Invalidation on Anxiety and Depression among Young Adults and Adults

[1]**Vaani Anand**, *Amity Institute of Psychology and Allied Sciences, Amity University Noida, Uttar Pradesh (AUUP), India*
vaanianand1709@gmail.com
[2]**Dr. Arun Kumar**, *Associate Professor, Amity Institute of Psychology and Allied Sciences, Amity University Noida, Uttar Pradesh (AUUP), India*
akumar11@amity.edu

Abstract: Emotional invalidation, defined as the dismissal, criticism, or neglect of an individual's emotional experiences, has been associated with increased psychological distress, including anxiety and depression. The present study explored differences in emotional invalidation, anxiety, and depression between adults and young adults to examine how perceived invalidation may vary across developmental stages. A comparative design was used, with 60 participants (30 adults and 30 young adults) completing measures of emotional invalidation, the Hamilton Anxiety Rating Scale (HAM-A), and the Hamilton Depression Rating Scale (HDRS). Results indicated that adults reported significantly higher levels of emotional invalidation, anxiety, and depression than young adults. These findings suggest that prolonged exposure to invalidating emotional environments may contribute to greater psychological distress in adulthood. The study emphasizes the importance of promoting emotionally supportive interactions across family, social, and occupational settings to enhance emotional resilience and mental well-being.

Keywords: *Emotional Invalidation, Anxiety, Depression, Adults, Young Adults*

1. Introduction

1.1 *Emotional Validation*

Emotions are fundamental to human experience. They guide decision-making, shape interpersonal relationships, and influence overall psychological functioning. When individuals express their emotions and receive understanding, empathy, and acknowledgment, they develop confidence in their emotional experiences. However, when their feelings are dismissed, minimized, criticized, or ignored, the experience is referred to as emotional invalidation.

Emotional invalidation occurs when a person's emotional responses are treated as incorrect, exaggerated, or unimportant. This may happen through direct statements such as telling someone they are "overreacting," or through more subtle behaviors like ignoring emotional disclosures or shifting attention away from expressed distress. Invalidation can occur in multiple contexts, including family systems, peer groups, romantic relationships, academic settings, and workplaces. During early developmental years, consistent validation helps individuals learn to identify, label, and regulate their emotions effectively.

Over time, chronic emotional invalidation can interfere with emotional regulation processes. When individuals are not taught that emotions are acceptable and manageable, they may struggle to cope adaptively. This disruption in emotional regulation has been linked to various forms of psychological distress, particularly anxiety and depression. Therefore, emotional invalidation represents an important psychosocial factor influencing mental health outcomes across the lifespan.

1.2 *Anxiety*

Anxiety is a psychological condition characterized by excessive worry, apprehension, and physiological arousal. While mild anxiety is a normal reaction to stress or perceived threat, persistent and disproportionate anxiety can impair daily functioning. Individuals experiencing anxiety may report restlessness, racing thoughts, irritability, muscle tension, sleep disturbances, and difficulty concentrating.

The relationship between emotional invalidation and anxiety can be understood through the lens of emotional processing. When individuals are repeatedly told that their feelings are inappropriate or exaggerated, they may begin to question their internal experiences. This uncertainty can increase cognitive vigilance and fear of negative evaluation. As a result, individuals may become overly cautious in expressing emotions, leading to heightened worry and self-monitoring.

Furthermore, emotional invalidation may contribute to anticipatory anxiety. If past emotional disclosures have been dismissed or criticized, individuals may expect similar responses in future interactions. This expectation can lead to avoidance behaviors and persistent concern about social judgment. Thus, emotional invalidation may serve as a contributing factor to anxiety by impairing emotional confidence, increasing self-doubt, and promoting hyper vigilance in interpersonal contexts.

1.3 *Depression*

Depression is a mood disorder marked by persistent sadness, diminished interest in activities, low energy, feelings of worthlessness, and reduced motivation. Unlike temporary emotional fluctuations, depression involves prolonged psychological distress that significantly affects cognitive, emotional, and behavioral functioning.

Emotional invalidation can play a meaningful role in the development of depressive symptoms. When emotional experiences are repeatedly dismissed or trivialized, individuals may internalize negative messages about themselves. Additionally, individuals exposed to chronic invalidation may suppress emotional expression to avoid further rejection. Emotional suppression can reduce opportunities for social support and increase feelings of isolation. Without healthy outlets for emotional expression, distress may accumulate internally, leading to persistent sadness and withdrawal.

Depression may also emerge from the sense of helplessness associated with invalidating environments. When emotional experiences are consistently dismissed, individuals may feel powerless in communicating their needs. This perceived lack of control can intensify feelings of hopelessness and contribute to depressive symptomatology. Therefore, emotional invalidation may indirectly foster depression by weakening emotional self-trust, reinforcing negative self-concepts, and limiting supportive interpersonal connections.

1.4 *Age Differences in Emotional Invalidation, Anxiety, and Depression*

The impact of emotional invalidation may vary across different stages of life. Age is an important developmental factor influencing emotional regulation, coping mechanisms, and psychological resilience.

Young adulthood is often characterized by identity exploration, academic or career transitions, and the formation of close relationships. Individuals in this stage may be particularly sensitive to social evaluation and interpersonal feedback. Emotional invalidation during young adulthood may intensify anxiety, as individuals are still developing stable

coping strategies and emotional awareness. Heightened emotional reactivity combined with uncertainty about self-concept may increase vulnerability to anxious symptoms.

In contrast, adulthood is typically associated with greater life experience and more established social roles. Although adults may possess more refined coping strategies, prolonged exposure to emotional invalidation over time may result in deeper internalization of negative beliefs. This long-term accumulation of invalidating experiences may contribute more strongly to depressive symptoms such as hopelessness, emotional withdrawal, and diminished self-worth.

Differences in cognitive maturity and emotional processing between younger and older individuals may influence how invalidation is interpreted and managed. Younger individuals may respond with heightened emotional reactivity and anxiety, whereas adults may demonstrate more internalized distress reflected in depressive patterns. Exploring age differences allows for a better understanding of how developmental stages shape psychological responses to emotional invalidation.

2. Review of Literature

Kim (2025), did a research to investigate whether perceived childhood emotional invalidation contributes to adulthood psychological distress. A random sample was taken of 102 adults from the United States. Results supported prior models and research in which higher childhood emotional invalidation was associated with higher psychological distress.

Talebi et al. (2025) conducted a study on the Iranian population to investigate the cultural background, traits, and role of perceived emotional invalidation and emotional invalidation in psychological problems. There were between 140 and 2263 people in the sample. Research indicates that there was a substantial positive correlation between the severity of psychological symptoms and both perceived and actual emotional invalidation.

Bungaro and Blandizzi (2025), did a research to clarify whether depression could mediate the relationship between perceived emotional invalidation and suicide risk, measured as severity of mental states prodromic of suicide; 399 adults were recruited from the general Italian population. The moderated mediation model indicated that depressive symptoms partially mediated the relationship between perceived emotional invalidation and the severity of mental states prodromic of suicide.

Rezaei and Paripishbar (2025), did a research to examine the moderating role of perceived emotional invalidation in the relationship between five forms of CT, emotion dysregulation, and psychological distress. 1613 Iranian volunteers took part in this study.

This result indicates that low perceived emotional invalidation predicted low emotion dysregulation and lower psychological distress.

Yazib (2025) investigated how different internalizing symptoms were affected by maternal invalidation and whether emotional regulation issues and self-criticism mediated the relationship between internalizing symptoms and childhood invalidation. There were 359 adults in the sample. The findings showed a strong correlation between eating disorder, social anxiety, and depression symptoms and maternal invalidation.

Bontempo and Bontempo (2025) did a systematic review to understand the negative consequences, of symptom invalidation of a person's experiences with illness. They reviewed 151 qualitative reports representing 11,307 individuals with endometriosis, Gulf War syndrome, irritable bowel syndrome, long COVID etc. Findings suggest that they developed a novel conceptual model explaining how symptom invalidation leads to these consequences and thereby undermines health outcomes.

3. Methodology

3.1 *Aim*

The aim of the present study is to investigate the association between emotional invalidation and psychological distress (anxiety and depression), and to examine whether these variables differ across age groups.

3.2 *Research Objectives*

a) To identify whether there is a significant relationship between emotional invalidation and anxiety among individuals.

b) To identify whether there is a significant relationship between emotional invalidation and depression among individuals.

c) To examine whether there are significant age differences in emotional invalidation, anxiety, and depression.

3.3 *Hypothesis*

H_1: There will be a significant difference in emotional invalidation between adults and young adults.

H_2: There will be a significant difference in anxiety levels between adults and young adults.

H_3: There will be a significant difference in depression levels between adults and young adults.

3.4 ***Variables***

Independent variable**:** Emotional Invalidation

Dependent variable**:** Anxiety and Depression

3.5 ***Sampling technique***

The study used a non-probability convenience sampling method to select participants. In this method, individuals are chosen based on their easy availability and willingness to participate rather than through random selection. The researcher approached participants who met the required age criteria (young adults and adults) and who consented to be part of the study.

3.6 ***Sample size:***

Adults – 30 (15 males and 15 females) and Young adults – 30 (15 males and 15 females) Total – 60

3.7 ***Inclusion and exclusion criteria***

Inclusion Criteria	Exclusion Criteria
Participants aged: - **young adults: 18–35 years** - **adults: 36–55 years**	Individuals with a diagnosed severe psychiatric disorder: - e.g., schizophrenia, bipolar disorder, psychotic disorders
University and working population: - **Young adults: currently enrolled in a college or university** - **Adults: currently employed in urban areas full-time**	Individuals currently undergoing: - intensive psychological or psychiatric treatment
Urban or Rural Areas: - **Individuals residing in urban areas for at least one year**	Individuals with a history of: - neurological disorders - brain injury, - serious medical conditions affecting psychological functioning
Language Understanding: - **Participants who can read and understand English**	Individuals with: - current substance dependence (excluding caffeine and nicotine)
Gender: - **Male (30)** - **Female (30)**	Individuals: - unable to comprehend - complete self-report questionnaires
Consent: - **Participants who provide informed consent**	----

3.8 ***Measures***

These are the respective tools used in the research are as follows:

3.7.1 The Hamilton Anxiety Rating Scale (HAM-A): The Hamilton Anxiety Rating Scale (HAM-A) is a clinician-administered scale developed by Max Hamilton in 1959 to assess the severity of anxiety symptoms. It consists of 14 items measuring both psychic and somatic anxiety. Each item is rated on a 5-point scale (0–4), with total scores ranging from 0 to 56. Higher scores indicate greater anxiety severity, and the scale is widely used in clinical and research settings.

3.7.2 The Hamilton Depression Rating Scale (HAM-D): The Hamilton Depression Rating Scale (HAM-D), developed by Max Hamilton in 1960, is a clinician-rated instrument used to measure the severity of depressive symptoms. The commonly used 17-item version assesses mood, guilt, suicidal ideation, sleep disturbance, psychomotor changes, and somatic symptoms. Scores vary according to item scaling, and higher total scores reflect more severe depression. It is considered a standard tool in depression research.

3.7.3 The Perceived Emotional Invalidation Scale (PEIS): The Perceived Emotional Invalidation Scale (PEIS) was developed by Melissa J. Zielinski and Jennifer c. Veilleun in (2018), is a self-report tool that measures individuals' perceptions of emotionally invalidating responses from parents during childhood. It assesses experiences such as dismissal, criticism, or minimization of emotions using a Likert-type scale. Higher scores indicate greater perceived emotional invalidation.

3.8 ***Statistical Analysis***

An Independent Samples ***t***-test was employed to examine significant differences between the two groups (Adults and Young Adults) on emotional invalidation, anxiety (HAM-A), and depression (HDRS) scores. Prior to conducting the *t*-test, Levene's Test for Equality of Variances was applied to assess the assumption of homogeneity of variance. A significance level of $p < .05$ was considered statistically significant for all analyses.

4. Result

An independent samples t-test was conducted to examine differences between the two groups (Group 0) Adults and (Group 1) Young Adults on emotional invalidation, anxiety (HAM-A), and depression (HDRS) scores.

Table 1: *Group Statistics*

	Age	N	Mean	Std. Deviation	Std. Error Mean
Invalidation	0	30	30.8880	3.99205	.72885
	1	30	25.0930	2.76535	.50488
HAM	0	30	16.6140	4.20148	.76708
	1	30	12.0163	4.02774	.73536
HDRS	0	30	18.9357	2.51215	.45865
	1	30	9.9673	2.75707	.50337

Table 2: *Independent Sample T-test*

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
									95% Confidence Interval of the Difference	
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	Lower	Upper
invalidation	Equal variances assumed	5.193	.026	6.536	58	.000	5.79500	.88664	4.02021	7.56979
	Equal variances not assumed			6.536	51.622	.000	5.79500	.88664	4.01553	7.57447
ham	Equal variances assumed	.008	.929	4.327	58	.000	4.59767	1.06262	2.47059	6.72474
	Equal variances not assumed			4.327	57.897	.000	4.59767	1.06262	2.47051	6.72482
hdrs	Equal variances assumed	.495	.485	13.170	58	.000	8.96833	.68099	7.60519	10.33148
	Equal variances not assumed			13.170	57.505	.000	8.96833	.68099	7.60494	10.33173

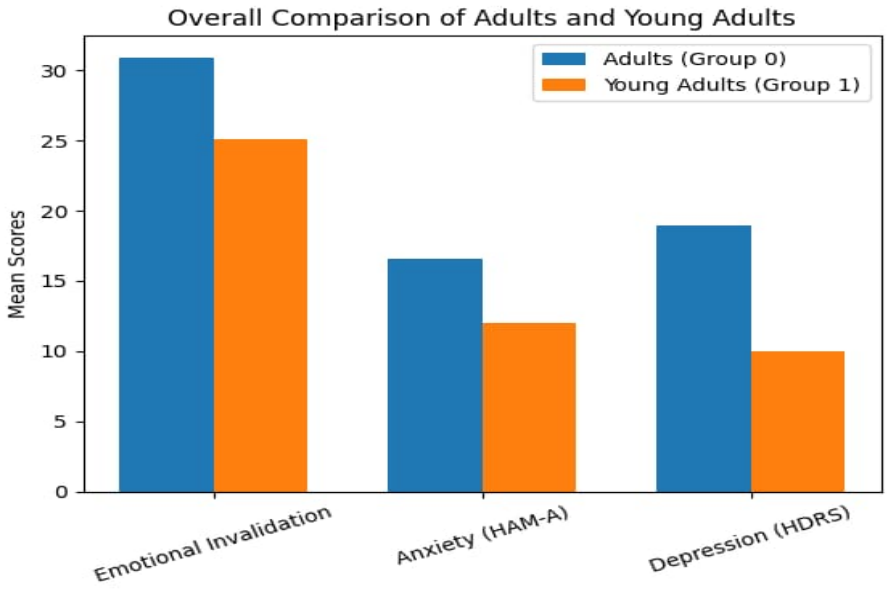

Figure 1: *Overall Comparisons of Adults and Young Adults*

a) ***Emotional Invalidation***

Levene's Test for Equality of Variances was significant (F = 5.193, p = .026), indicating that the assumption of homogeneity of variance was violated. Analysis revealed a statistically significant difference in emotional invalidation scores between the two groups, t (51.62) = 6.536, p < .001.

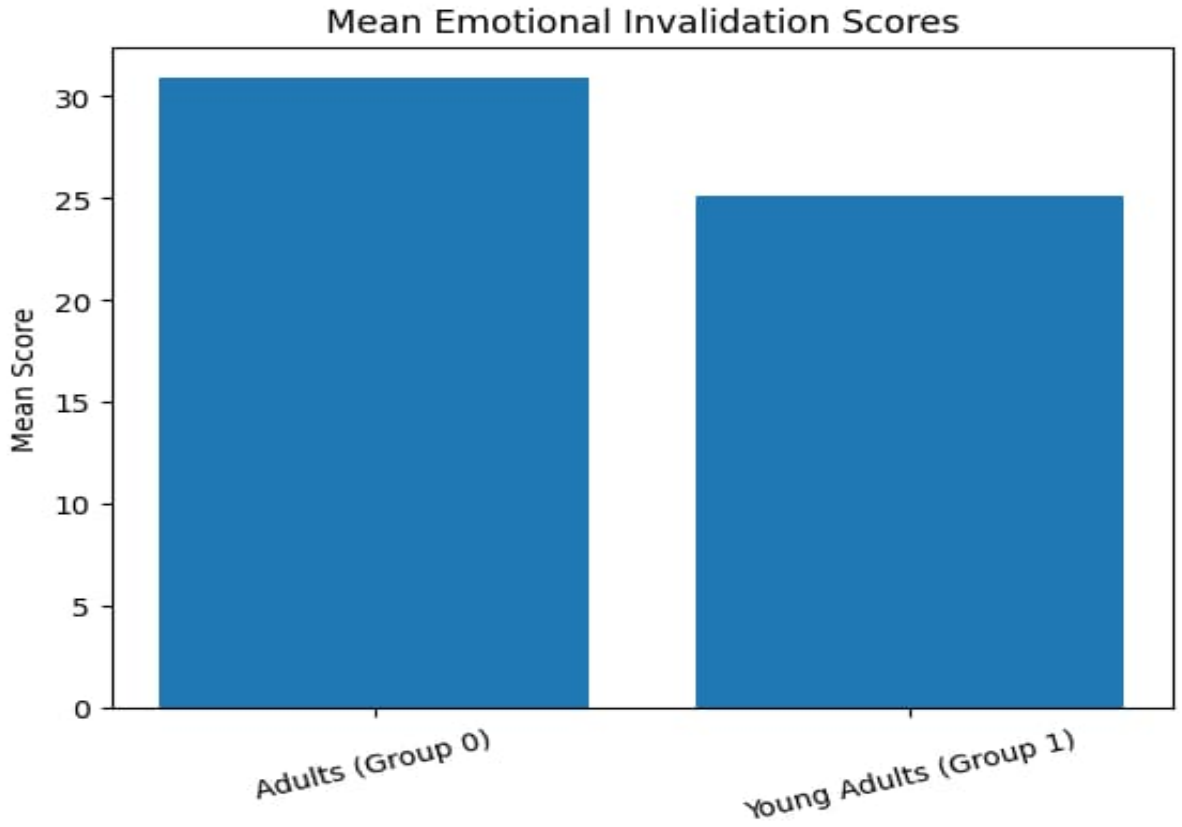

Figure 2: *Mean Emotional Invalidation Scores*

Participants in Group 0 Adults (M = 30.88, SD = 3.99) reported significantly higher emotional invalidation compared to Group 1 Young Adults (M = 25.09, SD = 2.77). The mean difference was 5.79, with a 95% confidence interval ranging from 4.01 to 7.57. This finding indicates that emotional invalidation levels differ significantly between the two groups.

b) ***Anxiety (HAM-Scores)***

Levene's Test was non-significant (F = .008, p = .929), suggesting that the assumption of equal variances was met. Therefore, the equal variances assumed results were interpreted. The independent samples t-test showed a statistically significant difference in anxiety scores between the groups, t(58) = 4.327, p < .001.

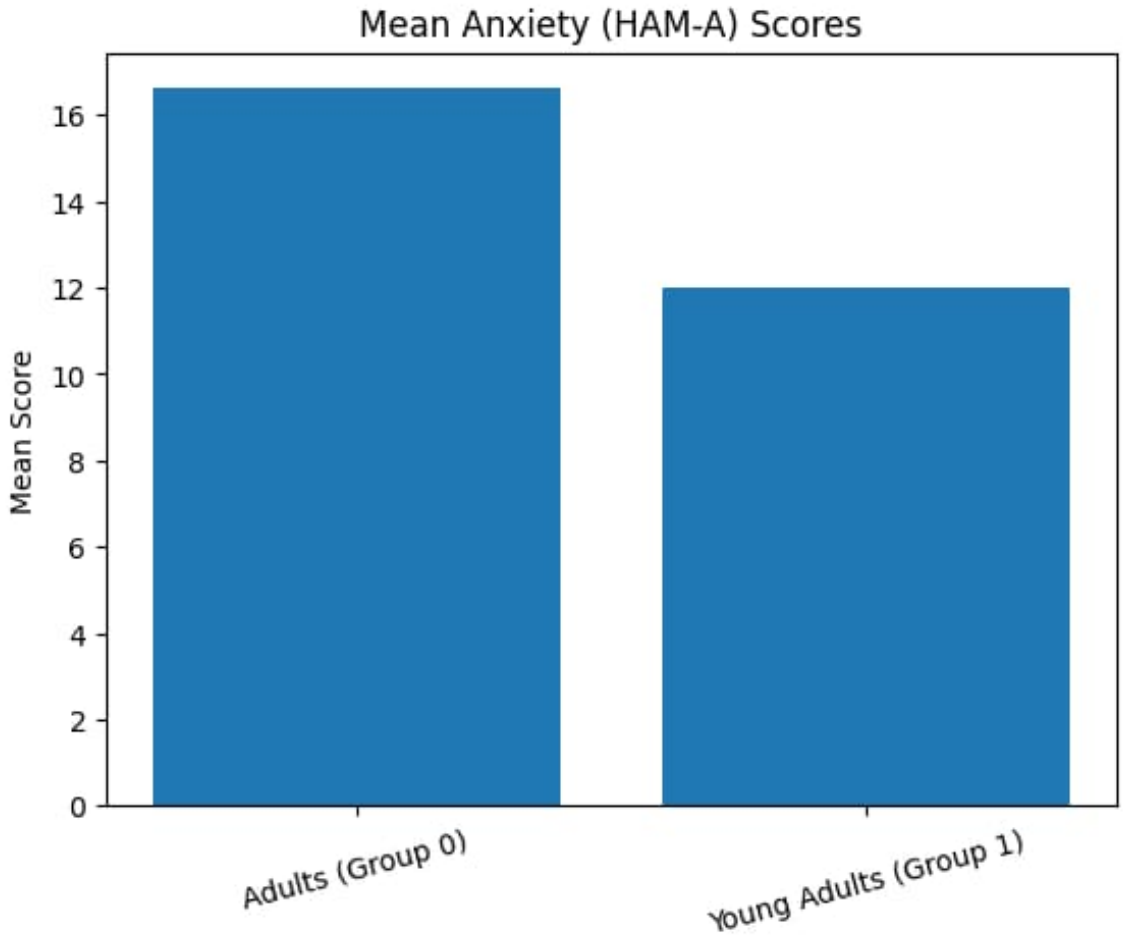

Figure 3: *Mean Anxiety Scores*

Group 0 Adults participants (M = 16.61, SD = 4.20) demonstrated significantly higher anxiety levels compared to Group 1 Young Adult participants (M = 12.02, SD = 4.03). The mean difference was 4.59 (95% CI = 2.47 to 6.72). This suggests that anxiety severity varies significantly across the two groups.

c) *Depression (HDRS Scores)*

Levene's Test for Equality of Variances was non-significant (F = .495, p = .485), indicating homogeneity of variance. Hence, the equal variances assumed results were used. A highly significant difference was observed in depression scores between the groups, $t(58)$ = 13.170, $p < .001$.

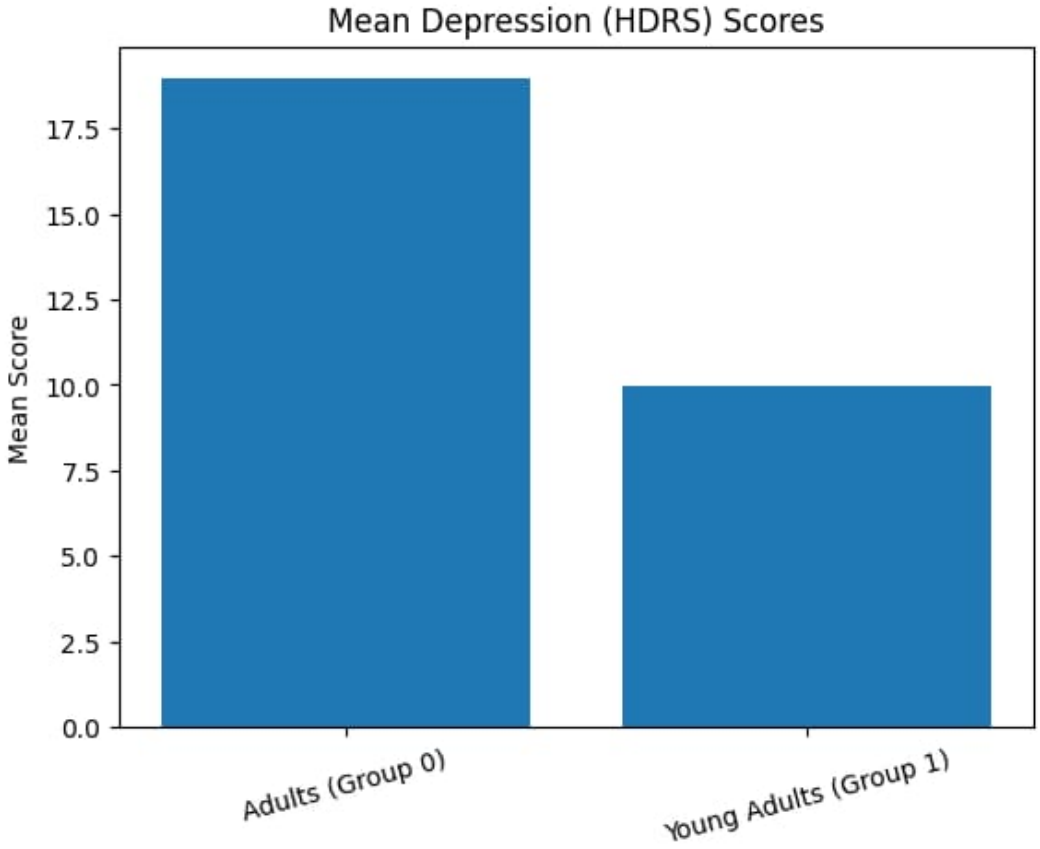

Figure 4: *Mean Depression Scores*

Group 0 Adults participants (M = 18.94, SD = 2.51) reported markedly higher depression scores compared to Group 1 Young Adult participants (M = 9.97, SD = 2.76). The mean difference was 8.97, with a 95% confidence interval ranging from 7.61 to 10.33. This result indicates a substantial difference in depressive symptom severity between the two groups.

An independent samples *t*-test was conducted to examine differences between the two groups on emotional invalidation, anxiety, and depression. The findings revealed statistically significant differences between the groups across all study variables. Participants in Group 0 reported significantly higher levels of emotional invalidation compared to Group 1, indicating notable variation in perceived emotional experiences between the groups.

Similarly, anxiety scores measured using the Hamilton Anxiety Rating Scale (HAM-A) differed significantly, with Group 0 demonstrating higher anxiety levels than Group 1. Depression scores assessed through the Hamilton Depression Rating Scale (HDRS) also showed a highly significant difference, with substantially elevated depressive symptoms observed in Group 0 participants. Overall, the results consistently indicate that individuals in

Group 0 exhibited greater emotional invalidation, anxiety, and depressive symptomatology compared to individuals in Group 1. These findings suggest a meaningful association between emotional invalidation and increased psychological distress, reflected through higher levels of anxiety and depression.

The findings demonstrate statistically significant differences between the two groups across all studied variables—emotional invalidation, anxiety, and depression. Participants in Group 0 Adults consistently showed higher levels of emotional invalidation, anxiety symptoms, and depressive symptoms compared to Group 1 Young Adults.

5. Discussion of Results

The present study was conducted to examine the differences in emotional invalidation, anxiety, and depression between adults and young adults. Emotional invalidation has increasingly been recognized as an important psychosocial factor influencing emotional functioning and mental health outcomes. The findings of the present investigation revealed statistically significant differences between adults (Group 0) and young adults (Group 1) across all study variables. Adults demonstrated higher levels of perceived emotional invalidation along with significantly elevated anxiety and depressive symptoms compared to young adults.

H1: There will be a significant difference in emotional invalidation between adults and young adults.

The higher emotional invalidation scores observed among adults suggest that emotional experiences across the lifespan play a crucial role in shaping psychological well-being. Emotional invalidation refers to experiences in which an individual's emotional responses are dismissed, minimized, criticized, or ignored by significant others. Over time, repeated invalidating experiences may weaken emotional confidence and interfere with adaptive emotional regulation. The findings of the present study align with the work of Kim (2025), who reported that perceived childhood emotional invalidation significantly predicted psychological distress in adulthood. This similarity indicates that early emotional environments may continue to influence emotional functioning later in life, thereby contributing to long-term psychological vulnerability.

The results are further supported by Talebi et al. (2025), who demonstrated a strong positive association between perceived emotional invalidation and severity of psychological symptoms within an Iranian population. Their findings emphasized that individuals exposed to emotionally invalidating environments tend to experience heightened psychological

difficulties. In the current study, adults may have accumulated invalidating interpersonal experiences across family, social, or occupational contexts, which could explain their comparatively higher emotional invalidation scores. In contrast, young adults may still be in transitional developmental stages where relationships, academic environments, peer and evolving social support systems provide partial emotional buffering.

H2: There will be a significant difference in anxiety levels between adult's and young adults.

Another important finding of the present study was the significantly higher anxiety levels among adults compared to young adults. Emotional invalidation has been theoretically linked with impaired emotional regulation, heightened emotional sensitivity, and increased stress reactivity. Bungaro et al. (2025) reported that perceived emotional invalidation contributes to affective distress through emotional dysregulation processes, ultimately increasing anxiety and depressive symptoms. Adults exposed to chronic invalidation may internalize feelings of uncertainty, self-doubt, or fear of emotional expression, which may manifest as persistent anxiety. The present findings therefore reinforce the understanding that invalidating emotional experiences interfere with adaptive coping mechanisms and increase vulnerability to anxiety disorders.

H3: There will be a significant difference in depression levels between adults and young adults.

The observed differences in depression between the two groups were particularly pronounced, with adults demonstrating substantially higher depressive symptomatology. These results are consistent with previous research highlighting depression as a central outcome associated with emotional invalidation. Bungaro, Blandizzi, and colleagues (2025) found that depressive symptoms mediated the relationship between perceived emotional invalidation and suicide-related mental states. Similarly, Yazib (2025) reported strong associations between maternal invalidation and internalizing symptoms such as depression and social anxiety. Emotional invalidation may contribute to feelings of worthlessness, helplessness, and reduced emotional self-acceptance, which gradually increase depressive tendencies over time.

The comparatively lower levels of emotional invalidation, anxiety, and depression among young adults observed in the present study may be explained through developmental and psychosocial protective factors. Young adulthood is often characterized by identity exploration, expanding peer networks, and increasing exposure to mental health awareness. Research conducted by Tormo-Irún et al. (2025) demonstrated that meaning in life acts as a

protective factor that reduces the negative emotional consequences associated with invalidating family environments. Similarly, Rezaei et al. (2025) found that lower perceived emotional invalidation predicted reduced emotional dysregulation and psychological distress. These findings suggest that young adults may possess adaptive psychological resources that mitigate the harmful effects of invalidation.

Furthermore, emotional invalidation does not occur solely within family environments but extends to relational and occupational domains. Brandão (2024) observed that perceived emotional invalidation was strongly associated with psychological suffering among couples, highlighting its influence within intimate relationships. Similarly, Jaafar et al. (2024) emphasized the role of emotional invalidation from supervisors and colleagues in shaping mental health outcomes among law enforcement professionals exposed to occupational stress.

The findings of the present research may also be understood through lifespan and emotional development perspectives. Adults often encounter increased responsibilities related to employment, relationships, caregiving, and social expectations. Overall, the results of the present study support existing theoretical and empirical literature indicating that emotional invalidation plays a significant role in psychological maladjustment. Adults demonstrated higher emotional invalidation along with greater anxiety and depression compared to young adults, suggesting that prolonged exposure to invalidating emotional environments may increase psychological distress over time.

In conclusion, the present study contributes to the growing literature emphasizing emotional invalidation as a key psychosocial factor influencing anxiety and depression. The differences observed between adults and young adults highlight the cumulative impact of invalidating experiences across the lifespan and emphasize the need for preventive interventions and emotionally supportive environments to promote long-term psychological well-being.

6. Conclusion

The present study was conducted to examine the differences in emotional invalidation, anxiety, and depression between adults and young adults. Emotional invalidation has emerged as an important psychological construct influencing emotional development and mental health outcomes.

The findings of the study revealed significant differences between adults and young adults across all variables examined. Adults reported higher levels of emotional invalidation compared to young adults, indicating that emotional experiences and interpersonal

interactions across the lifespan may influence individuals' perception of emotional acceptance and understanding. The study highlights the strong association between emotional invalidation and mental health difficulties. Individuals who perceive their emotions as dismissed or misunderstood may develop difficulties in emotional regulation, self-expression, and coping, which can subsequently increase vulnerability to anxiety and depression.

The findings of the present research are consistent with existing psychological literature emphasizing the importance of emotional validation in promoting psychological well-being. Emotional validation plays a crucial role in fostering emotional security, self-acceptance, and resilience, whereas invalidation may contribute to emotional suppression and psychological discomfort.

In conclusion, the present study contributes to the growing understanding of emotional invalidation as a significant factor associated with anxiety and depression. The observed differences between adults and young adults emphasize the cumulative impact of emotional experiences across developmental stages.

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