

Brief Report

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A New Perspective on Maladaptive Coping: The Role of Rigidity

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Introduction

A major issue in emotion regulation is not which strategies people use, but their ability to change them when situations shift. Emotions shape daily functioning, but people differ in how they regulate them. Emotion regulation involves influencing emotional experiences through strategies such as rumination, suppression, and reappraisal, which vary in effectiveness depending on context and individual differences (Gross et al., 1998; Kozubal et al., 2023). Psychological flexibility supports adaptive coping and resilience, while rigidity is associated with maladaptive processes such as rumination, perfectionism, and compulsivity, as well as increased risk for psychopathology (Kashdan & Rottenberg, 2010; Morris & Mansell, 2018; Schultz & Searleman, 2002). Effective regulation depends on adjusting strategies to situational demands, as emphasized by person-situation-strategy frameworks (Dore et al., 2016). However, rigid thinking can limit this adaptability and lead to persistence in ineffective responses. Current interventions often overlook people's ability to adapt emotion-regulation strategies across situations and the implications of doing so. Therefore, this study examines whether rigidity restricts strategy use and reduces emotion-regulation flexibility for future clinical implications. We predict that lower rigidity will support more adaptive and flexible regulation.

Empirical Question

Does psychological rigidity mediate the use and/or range of use of (mal)adaptive emotion regulation strategies (ERS)?

Pilot Method

Participants

Convenience sampling occurred on the Pacific University campus for undergraduate populations, by using email and in-person solicitation. To be eligible for this study, participants must be enrolled in the university and be 18 years of age or older. No other exclusion criteria were applied. We successfully recruited 28 participants, most of whom were assigned female at birth (72.4%) and 24.1% who were assigned male at birth.

Materials

The materials for this study include a demographic measure, as well as the following measures:

Clinical Perfectionism Questionnaire (CPQ) assesses pursuit of high personal standards, concerns about not meeting those standards, and self-worth contingent on their standards attainment using 12 questions on a 4-point Likert scale (Fairburn et al., 2003).

Ruminative Response Scale (RRS) assesses the tendency to engage in rumination when experiencing sadness or depression using 10 questions on a 4-point Likert scale (adapted from Foa et al., 2002).

Situational Emotion-Regulation Scale (SERS) is a 16-item scale developed by our research team to assess participants' rumination, suppression, distraction, reappraisal, and mindfulness across a variety of distressing contexts. (Castro, Cowherd, & Vasquez, 2025).

Brief Coping Orientation to Problems Experienced (Brief-COPE) is a 28-item self-report measure assessing individuals' coping responses to stress, capturing three overarching styles of coping: problem-focused coping, emotion-focused coping, and avoidant coping (Carver, 1997).

Flexible Emotion Regulation Scale (Flex-ER) is a 10-item self-report measure assessing personal, trait-based differences in emotional flexibility (Gärtner et al., 2025).

Volunteers self-selected into the study through a Qualtrics link, where they completed an electronic informed consent outlining study purpose, procedures (30-60 minutes), risks/benefits, confidentiality, voluntary participation, and researcher contact information. Upon consenting, participants completed the measures in a fixed order: Ruminative Response Scale (10-item), Clinical Perfectionism Questionnaire, Flex-ER Scale, Obsessive-Compulsive Inventory-Revised, Situational Emotion-Regulation Scale, Brief-COPE, and a demographic questionnaire, with each scale presented on a separate page. Following completion, participants received a debriefing statement including study information and campus mental health resources. All data was collected and stored anonymously, with no personally identifiable information.

Pilot Results

Descriptive statistics and reliability analyses were conducted for all measures, with strong reliability for rigidity constructs and weaker reliability for flexibility measures. Correlational findings showed that maladaptive strategies were generally inversely related to adaptive strategies, while rigidity variables were positively associated and linked to greater use of avoidant and emotion-focused coping, as well as reduced flexibility. Regression analyses indicated that only perfectionism significantly predicted lower emotion-regulation flexibility, with other rigidity measures remaining non-significant.

Conclusion

We found that psychological rigidity, particularly perfectionism, is associated with reduced flexibility in emotion regulation across contexts. While rigidity did not consistently predict the use of specific maladaptive strategies, it limited people's ability to adaptively select strategies depending on situational demands. These findings, if expanded, can promote the use of interventions targeting rigid cognitive and behavioral patterns that may help improve emotional flexibility. Future research should refine measurement tools and examine how different facets of rigidity influence emotional adaptability across diverse populations.

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