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Social Sharing of Emotion, Emotional Recovery, and Interpersonal Aspects

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Abstract

Social sharing of emotion is a very common long-term consequence of emotional experiences. Despite the fact that it reactivates the emotions associated with the experience, people are prone to talk about the negative events they face. So, why do people share their emotions? From an intrapersonal perspective, a widespread belief exists that verbalising an emotion alleviates the impact of an emotional event. The purpose of our research was to examine whether verbalisation of emotions effectively contributed to the recovery from the emotion. We review the correlative and experimental studies that were conducted to test this hypothesis. They consistently failed to support the view that mere talking about an emotional memory can lower its emotional load. Nevertheless, participants generally reported that they perceived the sharing process as beneficial. The question then remains as to why people share their emotions and report it is a beneficial process, if it does not bring emotional recovery. To answer this question, we shifted perspective and studied the interpersonal factors implied in the social sharing process. In the following of the chapter, we suggest that the effects of social sharing depend on the social context in which it occurs. We first consider types of sharing partners that are commonly chosen both as a function of age and according to the type of emotional situation experienced. Then, the types of helpful responses from sharing partners are examined. Finally, recent studies on the effects of specific sharing partner's reactions on affiliation and cognitive benefits are presented. In the conclusion of this chapter, implications of the research on social sharing for the field of emotion regulation are considered.

Social Sharing of Emotion, Emotional Recovery, and Interpersonal Aspects

Our life is rarely devoid of emotional experiences for a very long time. Emotions are elicited as a function of the significance or appraisal of a specific antecedent event to the experiencing person. Emotion theorists usually consider that emotions consist of three additional components: physiological changes, expressive behaviors or reactions, and subjective or experiential changes (Arnold, 1960; 1988; Ekman, 1992; Frijda, 1986; Izard, 1977; Lang, 1983; Lazarus, 1966; Leventhal, 1984; Ortony, Clore, & Collins, 1988; Roseman, 1984; Scherer, 1984). Since the classic writings of Walter Cannon (1929), emotions are rightly conceived as emergency reactions taking place in the framework of homeostasis. Energy-consuming physiological responses that are central to an emotional state cannot last long. Emotional responses are thus usually considered to last a few seconds or minutes and to be regulated immediately (Frijda, Mesquita, Sonnemans, & Van Goozen, 1991). Thus, emotions generally appear as short-lived phenomena, essentially consisting of brief and temporally well-circumscribed disruptions affecting the course of the person's life. An emotion would immediately be concluded by a self-control, or self-restoration procedure (e.g., Carver & Scheier, 1990; Frijda, 1986).

Now, consider the following questions. In the hours and days following an emotional experience, how often would it come back to the person's mind? How many thoughts--whether spontaneous or deliberate--do they have for what happened, for the feelings they had, or for elements of this specific experience? And how often did they talk about it? In what delay after the episode? And to whom? To how many people did they tell what happened? Quite generally, when such questions are answered, it becomes obvious that emotions do not really stop with the emotional circumstances and that they imply long-lasting regulatory processes.

In this chapter, we will focus our attention on one long-lasting regulatory process called social sharing of emotion. We will first review the empirical evidence regarding its frequency and characteristics. One of these characteristics is that social sharing of emotion reactivates the initial components of the emotional experience. The question is then addressed as to why people share their emotions with others? The following part of this chapter focuses on the intrapersonal recovery effect of emotional verbalization. Both common sense and scientific literature hold the assumption that sharing an emotional episode should serve a cathartic or venting function by bringing emotional relief. The research addressing this hypothesis is reviewed. Next, it will be proposed that social sharing is not *per se* beneficial, but that it could be beneficial depending on emotional experiences and sharing goals, characteristics of the sharing partners, as well as their reactions. We thus extend our analysis by considering emotional sharing in the context of social interaction, and examine the types of sharing partners chosen as well as their responses. Next, we turn to evidence suggesting that depending on the type of partner and his/her reactions, social sharing of emotion has interpersonal and cognitive-affective beneficial effects. On the basis of these findings, we argue that social sharing may have beneficial effects because it fulfills the two fundamental needs of affiliation and social consensus.

Emotion Regulation and Long-Term Components of Emotions

It has long been known that traumatic experiences are generally followed by recurrent trauma-related thoughts and by an urge to talk about the experience. Over a decade ago, we hypothesized that not only trauma, but every emotional experience had long-lasting intrapersonal and interpersonal consequences (Rimé, 1989; for a discussion, see Philippot & Rimé, 1998). Numerous studies using diverse designs were then conducted to test this hypothesis. They led to the conclusion that, in an overwhelming manner, people ruminate about their emotional episodes and share their emotions with other people. They do so

recurrently in the following days and weeks, or even months. More intense emotional experiences are ruminated and socially shared more often and for a longer time than less intense experiences (Rimé, Mesquita, Philippot, & Boca, 1991; Rimé, Noël, & Philippot, 1991; Rimé, Philippot, Boca, Mesquita, 1992; Rimé, Finkenauer, Luminet, Zech, & Philippot, 1998).

Our social psychology perspective then led us to develop a particular interest in the "social sharing of emotion" and for the potential role played by these processes in coping with or regulating emotion. Under this label, we examined a process that takes place during the hours, days, and even weeks and months following an emotional episode. It involves the evocation of an emotion in a socially shared language to some addressee by the person who experienced it. Very generally, this person will talk with others about the event's emotional circumstances and his/her feelings and reactions to it. In particular cases, the addressee is only present at the symbolic level, as is the case when people write letters or diaries.

The basic evidence in support of the view that very generally (i.e., in 89 to 100%), emotion is followed by the social sharing of emotion were reviewed elsewhere (Rimé, Mesquita et al., 1991; Rimé, Noël et al., 1991; Rimé et al., 1992, 1998) and can be summarized as follows: (1) The need people have to share their emotional experiences with others does not depend upon a person's level of education. Social sharing of emotion is equally shown whether the persons hold a university degree, or whether their education was limited to elementary school; (2) Social sharing is observed with approximately equal importance in regions as diverse as Asia, North America, and Europe; (3) The type of basic emotion felt in the episode is not a critical factor with regard to the need to talk about it. Episodes which involved fear, or anger, or sadness, are reported to others as often as episodes which involved happiness, or love. However, emotional episodes involving shame and guilt tend to be verbalized at a somewhat lesser degree; (4) Social sharing is started in the majority

of cases very early after the emotion--usually on the day it happened. It most often extends over the following days and weeks--or even months when the episode involved a highly intense emotion; (5) Social sharing is typically a repetitive phenomenon, as the majority of emotions are shared repeatedly, and with a variety of intimate persons (e.g., parents, spouse or partner, friends, siblings); (6) The exposure to the narrative of an emotional experience of another person leads the receiver to socially share this narrative with other people (secondary social sharing).

The Paradox of the Social Sharing of Emotion

An important feature of this process of talking about one's past emotional experience is the fact that it elicits the reactivation of the shared emotion. When the memory of an emotional episode is accessed, the components of the associated emotional responses (i.e., physiological, expressive, experiential) are also activated (e.g., Bower, 1981, Lang, 1983; Leventhal, 1984). Pennebaker (e.g., 1993a) showed that writing about one's past emotional experiences had an impact on autonomic responses and on mood state. That this is elicited also during a social sharing situation was confirmed in a study wherein participants had first to describe a past emotional experience in a detailed manner (Rimé, Noël et al., 1991). Immediately after, these participants had to complete a form with items examining what they had experienced when reaccessing the emotional memory. A majority of participants reported the experience of mental images of the emotional event, as well as accompanying subjective feelings and felt bodily sensations. This suggested that sharing an emotion elicits an emotion in the subject him or herself. Participants' affective reactions to the study-induced emotional evocation were assessed by a further question: "To what extent was completing this questionnaire a pleasant or painful experience for you?" The type of primary emotion involved markedly influenced the answers. Not surprisingly, reporting an experience of joy was rated as more pleasant than reporting an emotion of sadness, fear, or anger. However,

more surprising was the fact that reporting fear, sadness, or anger was rated as painful or extremely painful only by a minority of the participants. Notwithstanding the reactivation of vivid images, feelings, and bodily sensations of a negative emotional experience, the sharing did not appear as aversive as one might have expected. Before terminating the study, a final question was addressed to the participants: "If you were asked now, would you be ready to complete a similar questionnaire on another past emotional event of the same kind: yes or no?" The answers were observed to be exactly the same whether the emotion shared previously was positively valenced (joy) or negatively valenced (fear, sadness, or anger). Overall 93.7% of the participants gave a positive answer.

Thus, these data suggest the paradoxical character of social sharing situations. On the one hand, social sharing reactivates the various components of the emotion which, in the case of negative emotion, should be experienced as aversive. On the other hand, sharing an emotion, whether positive or negative, is a situation to which people are inclined to expose themselves quite willingly. If people are so eager to engage in a social process in which they will experience negative affect, then they should be driven to do so by some powerful incentive. What could be the rewards they find?

The Ubiquitous Cathartic View of Emotional Expression

When the question arises of the motives driving people to the verbal expression and social sharing of their emotions, the first consideration which comes to mind in our Western culture regards the intrapersonal aspects of the question. We immediately concentrate on the assumption that this process serves some "cathartic function". We presume that the person who experienced an emotion made use of talking as a discharge process which should eliminate the load of the emotional experience. We thus predominantly see talking about emotional experiences as a regulatory process which is initiated early after the emotional experience.

That this is the case is illustrated by the frequent allegation by laypersons that "talking about emotions makes you feel good", or that "talking about one's emotions brings relief". On this basis, the person who has just gone through a painful emotional experience is often recommended to "talk it out" or "to get it out off his/her chest". Such admonishments are meant to induce the person in telling the story and in expressing the related thoughts and feelings. Common sense thus seems to assume that verbalizing an emotional memory can transform it and that after verbalization, this memory would lose a significant part of its emotional load. One of our studies clearly confirmed this. We found that 89% of respondents in a large sample of laypersons ($N = 1024$) endorsed the view that talking about an emotional experience brings relief (Zech, 2000). Virtually no one refuted this view. Common sense actually holds firmly to the assumption that the mere talking about an emotional experience is conducive to emotional relief and emotional recovery. If this layperson belief could be supported by empirical data confirming that verbalizing an emotion brings "emotional recovery" or "emotional relief," then the paradox mentioned above would become clear. People would tolerate reexperiencing because of this final benefit in terms of well-being.

This line of reasoning would probably be left unquestioned by most psychologists. Indeed, we all share the laypersons view. Our discipline exposes us to abundant theoretical information which is, at least at first sight, relatively consistent with the laypersons belief. Indeed, most of the psychotherapy schools consider that expressing emotion is a critical tool to psychotherapeutic change. In addition to this consistent theoretical support of the beneficial effects of emotional expression, reviews of the psychotherapy outcome literature often conclude that high levels of client experiencing in therapy sessions counted among the variables related to a good outcome (e.g., L. S. Greenberg & Malcolm, 2002; Klein, Mathieu-Coughlin, & Kiesler, 1986; Orlinsky & Howard, 1986; Pos, Greenberg, Goldman, & Korman, 2002). Thus, psychotherapy theories, emotional expression, and psychotherapy outcomes are

seen as linked in many regards. The processes behind these links are probably much more complex than what a simple ventilation hypothesis would propose. Nevertheless, considering this framework, it is very tempting for psychologists to endorse, as lay people do, a general a priori according to which expressing and verbalizing emotion would help to recover from the emotional experience.

The ventilation, or cathartic, a priori view of the effects of expression or verbalizing an emotion can be explained as follows. When people recall an emotional experience, the emotional intensity of the felt emotion generally decreases as a function of the time elapsed since the original episode happened. This represents the natural recovery from the emotion. According to a ventilation or cathartic view, socially sharing an emotional experience is predicted to accelerate this process and thus, to bend the slope of the recovery process at the moment the sharing was completed. It should be stressed that strictly speaking, with the exception of the expression of emotions, the ventilation view makes no proposition regarding the way in which the sharing process should be achieved, nor regarding the way the sharing partner should react or behave. In its essence, the ventilation view attributes the expected relief effects to *the mere verbalizing of the emotional experience*.

It is remarkable that despite the popularity of the topic and despite the place taken by the sharing of emotions in everyday life, empirical research on this question was virtually absent from the literature throughout the twentieth century. In the last 10 years, we conducted a large number of investigations—both in naturalistic conditions and in the laboratory environment--aimed at assessing how far the social sharing of emotion actually had the predicted impact on people's degree of emotional recovery from the shared episode.

Is Social Sharing of Emotion Conducive to Emotional Recovery?

Spontaneous Social Sharing and Emotional Recovery.

We examined this question in many of our questionnaire studies of social sharing. The research design generally involved assessing (1) the initial intensity of the emotion elicited by the episode, (2) the extent of sharing that developed after, and (3) the intensity of the emotion elicited when the memory of the episode was activated later. We tested the hypothesis that there is a positive correlation between the amount of social sharing after the emotional event and the degree of emotional recovery--or the difference between (1) and (3). The latter variable was called the "recovery index" and thus represented the difference between the initial and the residual intensity of the emotion elicited by the target event. This correlational hypothesis was first considered in one of the autobiographic recall investigations conducted by Rimé, Mesquita, et al. (1991, Study 6). Unexpectedly, neither the amount of social sharing, nor the delay of social sharing were found to be related to emotional recovery. After this first study, we conducted innumerable studies using questionnaires and autobiographic recall in order to examine either some specific aspect of the sharing process, or some specific respondent variables such as age, education, culture, personality differences, etc (for a review, see Rimé & al., 1998). In all of them, we systematically assessed the correlation between the extent of sharing and the recovery index, and quite generally, the observed coefficient failed to be significant. In studies using the diary design (Rimé, Philippot et al., 1994, Study 3), recovery was assessed by the difference between the impact each daily event had when it occurred and its residual impact as rated several weeks later, at follow-up. Again no significant relation was observed between this recovery index and extent of social sharing manifested when the event happened. In the studies which used a follow-up design, the extent of social sharing naturally developed by participants was generally assessed in the days following the emotional event, and the degree of recovery was usually checked later on

several occasions (e. g., after 1 week, after 2 week, and so on). They generally failed to confirm the existence of a significant positive correlation between the two sets of variables, and in some cases, a negative correlation was observed (e. g., Zech, 1994). Our studies comparing secret and shared emotions offered another opportunity to test the common sense view (Finkenauer & Rimé, 1998b). However, in the two different studies we conducted, when shared and secret emotional episodes were compared for the intensity of the emotion these episodes still elicited in respondents, no significant difference occurred (Finkenauer & Rimé, 1998a). Paradoxically, as compared to shared emotions, emotional memories which were never shared were found no more no less emotionally arousing when reaccessed at the time of the investigation.

In conclusion, the layperson's view was in no manner supported by these data. To our surprise, our studies never supported the prediction that sharing an emotion would reduce the emotional load. Our data were perfectly consistent in this regard. In sum, our correlational findings overwhelmingly suggested that verbalizing an emotional experience does not contribute to emotional recovery as such. Yet, it might be premature to conclude from these generally negative data that social sharing of emotion has no effect on emotional recovery. From studies conducted on the health effects of a procedure in which participants are instructed to write extensively about past emotional traumas, Pennebaker and colleagues suggested that qualitative aspects of expression should be considered (for a review, see Lepore & Smyth, 2002; Pennebaker, 1989). Thus, in a study by Pennebaker and Beall (1986), writing about factual aspects of an emotional episode did not affect health variables, while writing about factual and feeling aspects did. Emphasising the feeling dimension might thus be critical for social sharing to have some impact. However, assessing qualitative aspects of spontaneous social sharing in survey research raises difficulties. In general, respondents do not seem to be able to precisely determine what they were talking about, nor which aspect--

fact or feeling--they had emphasised in a previous social sharing. To illustrate, items assessing respectively to what extent "facts" and "feelings" were shared usually yield high correlations, suggesting that they did not really tap distinct elements. Therefore, subsequent studies were conducted using the experimental induction of social sharing of emotion.

Experimental Induction of Sharing and Emotional Recovery.

Experiments comparing several forms of sharing were thus conducted in order to assess how far qualitative distinctions have consequences for emotional recovery (Zech, 1999, 2000). Rimé, Zech, Finkenauer, Luminet, and Dozier (1996) had 127 psychology students interview one person each about a recent negative emotion. Four types of sharing were created by emphasising respectively (1) factual aspects, (2) feelings and emotions, (3) meanings elicited by the event. In the fourth condition, no specific emphasis was adopted. The emotional impact of the event was assessed on seven indices before the sharing situation and again one week after. Dependent variables included a good deal of indices likely to reflect the current subjective experience of the respondent relative to the target emotional episode (e.g., emotional intensity of the memory, intensity of bodily sensations when thinking about the event, intensity of action tendencies when thinking about the event, challenged basic beliefs, extent of episode-related mental rumination, need to socially share, etc.). No effect of sharing type was found for these indices, nor was it found for extent of sharing in the following week.

Zech and Rimé (2002, Study 1) attempted a replication in a more controlled laboratory study. Interviews with three conditions of sharing were conducted by the same person. In two of them, participants talked about the most upsetting event of their lives for 20 minutes, with a focus on felt emotions in one and with a focus on facts in the other. In a control condition, they talked about a trivial topic. Dependent variables were collected before sharing, immediately after, at a one week, and at a two months follow-up. No significant effects of type of sharing were found. However, at the final follow-up, participants in the felt emotions

condition rated the sharing as more meaningful, more interesting, and higher in overall subjective impact than participants in the other two conditions.

In a third study, 278 psychology students each had to interview two volunteers about a recent *unrecovered* negative event (Zech & Rimé, 2002, Study 2). Before manipulation, all participants had to rate how much this memory still affected them. Four conditions were conducted: (1) the verbalisation of the emotional event whose emotional impact has been rated in the questionnaire (Target emotion), (2) the verbalisation of another emotional episode (Other emotion); (3) the verbalisation of trivial topics (Trivial); and (4) no verbalisation at all (No verbalisation control). For one of the two volunteers, student interviewers had to conduct an interview on the Target emotion. For the other volunteer, the student interviewers were randomly assigned to one of three other conditions (Other emotion vs. Trivial vs. No verbalisation). Detailed instructions had to be followed by interviewers in conducting each of the experimental conditions. At the end of the 30-minute interview, participants were rated by interviewers on how much they had overtly expressed feelings. In addition to emotional recovery variables, dependent variables also included the perceived subjective benefits brought by the verbalisation. For example, participants were asked whether the experiment had been meaningful for them, whether it was relieving for them, whether it had clarified their view of the event, whether they were comforted by others, and whether it had helped them. Follow-up ratings of emotional impact and subjective benefits of the experiment were collected at a follow-up session conducted 3 days later. Results of this study again confirmed that verbalisation of emotion does not alleviate the emotional impact of unrecovered events. Indeed, participants reported a similar decrease of emotional impact in each condition. However, participants who talked about emotional topics with the experimenter (in the Target and Other emotion conditions) reported significantly more subjective benefits of having participated in the study. Compared to participants in the two control conditions (Trivial and

No sharing controls), participants in the felt emotions conditions consistently rated the sharing as more beneficial to them in general (e.g., it was useful), as more emotion-relieving (e.g., made them feel good), more cognitively helpful (e.g., it helped in putting order in themselves), and as more socially beneficial (e.g., they experienced comforting behaviors from the part of the recipient).

These studies using a social sharing induction procedure thus led to contrasting observations. On the one hand, no changes were found in the degree of emotional recovery of the emotional memory, which suggested that sharing emotional experiences failed to alleviate the load of the emotional memory. However, participants who shared their emotions openly reported that the experience was ultimately beneficial compared to the controls. Thus, whereas objective benefits failed to be evidenced, subjective--or alleged-- benefits clearly showed up from our procedure.

Recovered or Unrecovered Events.

Faced repeatedly with these unexpected negative findings regarding effects of sharing on emotional recovery, we wondered whether the notion of emotional recovery on which our studies relied made sense at all. Rimé, Hayward, and Pennebaker (1996) addressed this question. Students were instructed to recall one emotional experience they "had recovered from" and one they "had not recovered from." For each, they rated initial and residual emotional impact, as well as initial and residual sharing. The data showed that the two types of episodes had initially elicited a comparable emotional impact. Consistent with all of our previous studies, they also failed to differ in initial sharing. Both were shared to a very large extent in the days and weeks after they occurred. However, confirming that the notion of "recovery" makes sense, the two types of episodes differed markedly in their residual emotional impact and thus yielded marked differences in the recovery index. This index was indeed much lower for non-recovered emotional memories than for recovered emotional

memories. Moreover episodes not recovered elicited much more residual sharing than recovered ones. We could therefore conclude that the notion of emotional recovery really makes sense. Emotional memories that people selected as "unrecovered" evidenced a stronger impact on subjective feelings and on social behavior than was the case for emotional memories that people selected as "recovered." And the two types of episodes were socially shared a comparable number of times at origin.

Unrecovered Events and Need to Share.

In eight different studies we conducted, participants rated the emotional intensity felt when remembering a recent emotional event ("residual emotional intensity") and the extent to which they (a) still felt the need to talk about it, and (b) still talked about it ("residual social sharing"). The delay between the target emotional event and follow-up assessments varied from a week (Rimé, Zech et al., 1996) to several months (e.g., Luminet, Zech, Rimé, & Wagner, 2000), or even several years (e.g., Rimé, Finkenauer, & Sangsue, 1994). Correlations were computed between residual emotional intensity and residual sharing for each data set. Across all studies, we found that the higher the residual emotional intensity was, the higher was the residual social sharing (for a review, see Rimé et al., 1998). This confirmed that unrecovered emotional memories do surface more in sharing behaviors than recovered ones.

How can we interpret this relationship? On the one hand, talking about an emotional memory can reactivate event-related emotional feelings. On the other hand, residual event-related feelings elicit residual sharing. Does this mean that people who have failed to recover from an emotion keep talking about it without limits? Examining the size of the correlations revealed that in six of our eight studies, residual emotional intensity was linked more closely to the need for sharing than to actual residual sharing. In short, when people fail to recover from an emotional episode, they feel the need to talk about it and they actually do so to some extent. Certain social constraints (Pennebaker, 1993b) are likely to moderate the relation

between residual emotionality and actual residual sharing. However, such constraints will at the very least leave intact a person's *need* to share. In other words, as long as an emotional memory elicits actual emotional feelings, the person can be expected to feel the need to talk about it.

Conclusion.

People who experience an emotion feel compelled to talk about it and to share it, preferably with their intimates. They do it quite willingly, despite of the fact that the sharing process reactivates the negative aspects of the emotional experience. A very widespread belief exists according to which sharing an emotion should bring emotional relief. Yet, both correlative and experimental studies, which were conducted to test the validity of this belief consistently failed to support this view. It does not seem that mere talking about an emotional memory has a significant impact on the emotional load associated with this memory. Nevertheless, people who share their emotions generally express the *feeling that the process is beneficial*. Additionally, whereas sharing was not found to have an impact on recovery, data were supportive of the opposite conclusion. *Lack of recovery* was markedly associated with the *perpetuation of sharing*, and even more markedly with the perpetuation of the need to share.

The abundance of the null findings finally led us to accept that despite stereotypes, socially sharing an emotion does not bring emotional relief as such. The data collected so far strongly suggest that the mere social sharing of an emotion is unable to change the emotional memory. After all, it does make sense with regard to adaptation. An emotional memory carries important information with respect to future situations. If we had the potential to alter the emotion-arousing capacities of such memories by *mere talking* about them, such equipment would deprive us of vital fruits of our experience (Rimé, 1999).

How do we Fare with Regard to the Literature?

As was mentioned earlier, the twentieth century was empirically silent most of the time with regard to the question of emotional ventilation and its effects. During the last two decades however, an important scientific interest has emerged regarding the relationship existing between the disclosure of emotion on the one hand, and well-being and health on the other hand. This interest was stimulated by the experimental work undertaken by James Pennebaker and his colleagues on the effects of disclosure of traumatic events. In the so-called "writing paradigm" (e.g., Pennebaker & Beall, 1986; Pennebaker, Colder, & Sharp, 1990; Pennebaker, Kiecolt-Glaser, & Glaser, 1988), participants are assigned to write about past stressful or traumatic events in their lives for 15 to 30 minutes during sessions held on several consecutive days. They are compared with participants instructed to write about trivial topics. Writing is generally done in the laboratory with no feedback given. A critical part of the procedure is that experimental participants are encouraged to really let go and explore their deepest thoughts and feelings about their experiences. The main outcome measures in these studies consist of the assessment of participants' health indices in the weeks following their participation. The basic finding was that when compared to participants in the trivial topic condition, those who wrote about their trauma showed less frequent illness related visits to the health center and fewer self-reported illness symptoms (e.g., Pennebaker & Beall, 1986). Various studies extended these positive findings to other health outcomes, including improved immune functions indices such as antibody responses to Epstein-Barr virus (Esterling, Antoni, Fletcher, Margulies, & Schneiderman, 1994). Although repetitive writing sessions are usually designed in these studies, a single 30-minutes writing session on real or imagery traumas was sufficient to produce a reduction of long-term number of illness visits to the health center and of self-reported symptoms (M. A. Greenberg, Wortman, & Stone, 1996). A large number of writing studies have now been conducted. Reviewers of these studies generally concluded that "opening up" and expressing stress-related thoughts and feelings was

associated with improved physical and mental health (Esterling, L'Abate, Murray, & Pennebaker, 1999; Littrell, 1998; Pennebaker, 1993, 1997; Smyth, 1998).

The findings issued from these writing studies are often understood as supporting the view that "putting emotion into words" is conducive to emotional recovery and emotional relief. However, whereas the design of these studies allow one to conclude that there are some positive effects of "putting emotion into words" on health indices, it does not address the process through which such effects are achieved. This process might involve factors totally alien to a ventilation effect. For instance, it might be that putting emotions into words in a solitary session stimulates the need to be with others and to share one's emotions with them. The resulting increase in received social support could thus account for health improvements. In sum, the writing design does not address the empirical question raised by the common sense belief. It does not test whether putting a specific emotional episode into words ends up in some emotional relief and in some sizeable alleviation of the person's memory of this episode.

Whereas laboratory studies addressing this verbalization-recovery question are scarce, recently developed clinical research conducted on the effects of Critical Incident Stress Debriefing (CISD) or Psychological Debriefing (PD) provides data which are much relevant in this regard. CISD is a group intervention technique developed for implementation immediately after a potentially traumatising event in order to prevent the development of a post-traumatic stress disorder (PTSD) among exposed individuals (see Dyregrov, 1997; Mitchell & Everly, 1995, for overviews). In PD or CISD, participants each describe what happened from their perspective, then express their prominent thoughts concerning the event, and they communicate "what was the worst thing for them in this situation." The technique thus clearly involves "putting emotions into words", or "talking it out". The use of this technique has been growing so rapidly in the last decade that a concern about its real

beneficial effects on PTSD symptomatology (i.e., intrusion, avoidance, and hypervigilance) has emerged (Deahl, 2000; Raphael, Meldrum, McFarlane, 1995; Rose & Bisson, 1998). Several studies that have assessed the effects of CIST or PD failed to find significant results (e.g., Deahl, Gilham, Thomas, Searle, & Srinivasan, 1994; Griffiths & Watts, 1992; Kenardy et al., 1996). A recent review of existing randomised controlled studies on the effects of PD interventions following trauma indicated that out of six studies, two found positive outcomes on indices of psychopathology (PTSD), two demonstrated no difference on outcomes, and two showed some negative outcomes in the intervention group as compared to non-intervention groups (Rose & Bisson, 1998). A recent meta-analysis conducted with very strict selection criteria concluded that: "Despite the intuitive appeal of the technique, our results show that CIST has no efficacy in reducing symptoms of post-traumatic stress disorder and other trauma-related symptoms, and in fact suggest that it has a detrimental effect" (Van Emmerik, Kamphuis, Hulsbosch, & Emmelkamp, 2002, p. 769). However, a variety of studies also indicated that a vast majority of victims or professionals involved in traumatic situations *reported* that psychological debriefings were useful and beneficial (e.g., Arendt & Elklit, 2001; Robinson & Mitchell, 1993).

Altogether, the reviewed data suggests that despite lay people's unanimous view, the effects of "putting emotions into words" are anything but a simple matter. Studies conducted with the writing paradigm showed that putting emotion into words in solitary sessions is related to improvements in health condition. These results are often taken as evidence that putting emotion into words brings emotional recovery. However, debriefing studies failed to evidence a "talking-recovery effect". Indeed, debriefing procedures did not consistently result in a significant alleviation of the emotional impact of the eliciting event (such as uncontrolled intrusive thoughts, avoidance of event-related cues, general emotional arousal...). Such negative results are at odd with any simple cathartic or ventilation view of the effects of

verbalizing emotions. On the other hand, debriefing procedures generally evidenced a "talking-relief effect". It showed that people who talked out their emotional experience report global, nonspecific feelings of relief or of personal benefits that they attribute to the expression situation. Such an effect is consistent with abundant evidence from social sharing studies that people are generally quite eager to talk about their emotional experiences and to share them with those around them (e.g., Rimé et al., 1998).

Interpersonal Aspects of Social Sharing

If the social sharing that spontaneously develops after emotional exposure does not affect the recovery process, why does it accompany emotional experiences almost systematically?

Should it be concluded that the urge to share generally elicited by an emotion is a useless manifestation and that it should not be considered as an emotion regulation process?

Alternative potential effects of socially sharing an emotion are currently under investigation in our laboratory. They may involve important health, cognitive and social functions (see Rimé et al., 1998). In the following, we want to focus on one of these lines of research that specifically deals with interpersonal aspects of social sharing of emotion. Because social sharing is a fundamental interpersonal process, its study should involve the examination of the interpersonal context in which it occurs. In addition, perceived and objective benefits of social sharing might go beyond the intrapersonal sphere and extend to interpersonal effects.

Research conducted on related areas such as self-disclosure, social support, and affiliation can shed some light on why people may want to share their emotions, with whom, and on the effects of the partner's reactions.. A recent model proposed that self-disclosure – i.e., personal information verbally communicated to another person -- should only occur if it is a good strategy to achieve goals such as self-clarification, social validation, or relationship development (Omarzu, 2000). In addition, it also proposed that self-disclosure should only occur if there is an appropriate target for self-disclosure. Complementing these hypotheses,

Horowitz and colleagues (2001) proposed that an appropriate target is someone who is able to satisfy the distressed person's goal, i.e., getting either emotional or esteem support. As a consequence, social support provided to a sharer would be most effective in reducing his/her distress if the listener's reactions match the sharer's goal.

Research on the effects of self-disclosure however showed that, without concerns about who the partner is, or how he/she reacts, people who engage in intimate disclosures tend to be liked more than people who disclose less. In addition, it has also been shown that disclosure causes people to like their listeners (for a review, see Collins & Miller, 1994). In fact, self-disclosure has been conceived as a key component of the development of intimate relationships (Reis & Patrick, 1996). Although contradictory findings have been found (e.g., Stroebe, Stroebe, Abakoumkin, & Schut, 1996), social support research has also indicated that supportive social networks tend to reduce distress in individuals under stress, whereas unsupportive or critical social networks can actually increase distress (e.g., Lepore, 1992; Major, Zubek, Cooper, Cozzarelli, & Richards, 1997; Manne, Taylor, Dougherty, & Kemeny, 1997).

Helpful and unhelpful reactions provided by listeners have already been described in the disclosure and social support literature (e.g., Dakof, & Taylor, 1990; Kelly & McKillop, 1996; Lehman, Ellard, & Wortman, 1986; Lepore, Ragan, & Jones, 2000; Pennebaker & Harber, 1993; Reis & Shaver, 1988). Partners are perceived as more helpful when they display empathy, understanding, validation, and care (Reis & Shaver, 1988). Other types of helpful behaviors have been observed such as giving advice or new information, telling a similar experience, and reassessing the situation (Horowitz et al., 2001; Goldsmith, McDermott, & Alexander, 2000).

Within the context of social sharing of emotion, perceived benefits of social sharing could thus be linked to the reinforcement of affective bonds that would result from emotional

sharing. If a sharer chose appropriate partners, and if partners respond supportively, social sharing could thus have lasting affective consequences for the sharer, but also for the relationship between the sharer and the listener. Reis and Patrick (1996) proposed that affective bonds consist of two dimensions: one called attachment (i.e., partners feel safe and close), the other called intimacy (i.e., partners share personal common knowledge). In this sense, sharing emotions may help to maintain close relationships, develop new ones but also increase social consensus between people and thus help social integration.

In the following, we present new data on sharing partners, on their responses and when these are considered to be helpful or not for the sharer. Experimental studies manipulating the listener's reactions as well as the group belongingness of the listener (whether intimate or stranger) are also presented. These studies examined the potential effects of social sharing of emotion on feelings of closeness or attachment to the listener, feelings of loneliness, and basic beliefs.

Who Are the Sharing Partners?

People may not share their emotions without concern for the identity and qualities of the sharing partner. Because they are immediately available, the more likely sharing partners should be those present in the immediate surroundings of the person, i.e., intimates. But, among those that are available, potential sharers may in fact search for a specific partner who has the abilities to answer the sharer's specific needs at a moment (see also Horowitz et al., 2001). For example, children may have different types of intimates, such as their parents, siblings, or peers. As compared to siblings or peers, their parents could be considered as more relevant for sharing their emotions because they represent the most important figures that can fulfill their needs. During adolescence however, peers and friends become an increasing reference for the adolescent's evolving behavior and thoughts. They might also become the main sharing partners. Later on, at adulthood, romantic relationships could take up this role.

To examine this hypothesis, we examined whether, as types of intimates and needs may evolve over age periods, types of sharing partners chosen would change over development and adulthood.

In one study, participants were school children, aged 6 and 8 years (Rimé, Dozier, Vandenplas, & Declercq, 1996). Each child was told either a high or a low emotion narrative. Immediately after, the child was brought to a playroom where two peers were playing. For 15 minutes, social sharing was monitored. Sharing occurred infrequently with no difference between emotion conditions, nor between age groups. This observation suggested either that children at this age range do not yet share their emotions, or that peers do not represent appropriate sharing partners for them. Further data argued in favour of the latter explanation. Parents, who were blind to the experimental conditions, rated their child's behaviour during the evening following the narrative session. These ratings revealed that 42% of the children who heard the low emotion narrative and 71% of the children who heard the high emotion narrative had shared the narrative with their parents. The latter rate is consistent with diary data from adults showing that some 60% of emotional experiences are shared during the day they occurred. As with adults, social sharing tended to be more repetitive among children who heard the high emotion narrative. However, it did not seem that children shared with partners other than parents.

A second study was conducted with boys aged 8 to 12 who attended a scout camp and took part in a frightening and exciting game during the night (Rimé et al., 1996). After the game, children rated their game-related emotionality on a 20-degree "emotion thermometer." The data suggested that a moderate intensity emotion was induced. The boys went back home on the next day. Three days later, parents rated their child's sharing since the camp. The ratings showed that children shared the night game in 97% of the cases. Six days after the game, parents again rated their child's sharing. Sharing rates amounted to 39%, thus showing

a sharp decline over time. Children's self-reports one week after the game revealed that sharing had occurred for 87% of the sample. Parents clearly emerged as the privileged sharing partners in this age group--mother in 93% and father in 89%. Siblings served as recipients in 48% of the cases, best friends in 33%, peers in 37%, and grandparents in only 5%.

In a third recent study conducted with 12 to 17 years old (Rimé, Charlet, & Nils, 2002), over 600 students were asked to recall an emotional episode in their recent past which was related to one of four basic emotions: fear, anger, sadness, or joy. They were then asked to report the extent to which they had shared it with 13 different categories of people. Results revealed that, regardless of the emotional valence or type of emotion experienced, the family and especially parents remained the main sharing partners of emotional experiences in this age group. But, as age cohorts got older, friends, including girl/boy friends and female best friends became increasingly important. Other people were rarely mentioned as sharing partners.

In a fourth study (Rimé, Finkenauer, & Sevrin, 1995), older adults (60 to 75 years) and elderly adults (76 to 94 years) were compared to a group of younger adults (25 to 40 years). Participants completed a questionnaire on the most emotional event of the day for five successive evenings. Among adults and elderly people, the profile of preferred sharing partners was very similar. From adulthood on, spouses and companions became the main sharing partners (over 75%), then the family (over 30%) and friends (about 20%) were preferred. As previously mentioned, other categories of people, such as strangers or professionals, were rarely used (less than in 5% of the cases).

In sum, in line with our hypothesis, types of sharing partners of one's emotional experiences change over age cohorts. Childhood is characterized by a choice in attachment figures or parents. Over age, new attachment figures are chosen. During adolescence, girl/boyfriends and female best friends become increasingly important. At adulthood and

among elderly people, spouses and companions become the main sharing partners. These results suggest that from childhood to old age, people who experience emotional situations share them not only with those who are available in their immediate surroundings but with those with whom they share the most intimate or close relationships.

In addition to the category of intimates that were chosen to socially share an emotional experience, a recent study investigated the age and gender of sharing partners of young adults (Zech, Christophe, Herbette, & Stroebe, 2002). Social science students (54.5% females) were asked to recall a negative emotional episode that they had shared with at least one person. The description of the person with whom they had primarily shared their emotions revealed that they had shared them in the majority of the cases with people older than themselves (66%) rather than with younger people (13%). Sharing partners were on average 30.73 years old ($SD = 13.42$) and no partner was younger than 18 years old. Independently of the participant's own gender, they also had shared with more female (61%) than male sharing partners.

In addition to these results, recent investigation on social sharing after professional rather than personal emotional situations added some interesting nuances to the above pattern. One study was conducted on 133 nurses who were asked about their sharing partners when they experienced an emotional situation at work, for example, when they were confronted with an upsetting situation regarding their patient (Laurens, Herbette, & Rimé, 2000). In this case, professionals such as their own colleagues, physicians or a psychologist became their primary partners of social sharing. Their spouse/partner, friends or family were chosen to a lesser extent. In another study, 79 police officers, medical and psychosocial aid personnel who arrived after a train crash involving 8 deaths in Belgium shared their emotions and feelings about the catastrophe primarily with their spouse/companion (61%) but for 39% of them, their primary sharing partners were their colleagues and work team (Zech, Ucros, Rimé, & DeSoir, 2002).

Altogether, these studies suggest that, depending on the emotional situation, people primarily share their emotions with different partners and not only with intimates as was suggested by the initial research. After professional situations, colleagues were privileged, while after personal situations, partners such as older people and women were preferred. Depending on the situation, people may thus choose partners who can provide an answer to their specific need. In professional situations, colleagues and other professionals could be seen as more knowledgeable about ways to cope with emotions related to work. Alternatively, the choice of evolving attachment figures over the age cohorts suggests that sharers of personal situations may select people who will provide them with empathy and emotional support. Women who were also preferred after personal situations could be selected because of their known interest and receptivity to emotional expression. In sum, these results suggest that people share their emotions with partners that can meet their needs either to receive interest, relevant information, or emotional support and empathy.

What Are the Helpful Reactions of the Listener?

In addition to the above pattern, we also investigated the possible helpful behaviors or reactions provided by a listener. In natural settings, a specific dynamic takes place between the speaker and the listener. A typical response of the listener is the expression of *interest* in the emotional story (Christophe & Rimé, 1997). Another response of the listener is *empathy*. The more emotional a story is, the more the listener will experience emotion. As a consequence of empathy, it is likely that the listener will *express support*. A fourth response is distance reduction. Indeed, Christophe and Rimé (1997) also observed that when intense emotions are shared, listeners reduce their use of verbal mediators in their responses. As a substitute, they display nonverbal comforting behaviors, like hugging, kissing, or touching. This suggests that sharing an intense emotional experience may decrease the physical distance between two persons.

These results were consistent with one study in which participants were asked to recall a social sharing interaction that they had found either helpful, or unhelpful (Zech, Christophe et al., 2002). To examine whether the perceived (un)helpfulness of the interaction was related to particular behaviors that the listener had shown (or not) during the interaction, participants were asked to rate the extent to which their listener had shown various behaviors (drawn from Christophe & Rimé, 1997) Results revealed that the listener had provided more attention and understanding, informational support (e.g., advice, reappraisal), reciprocity/empathy-type behaviors (e.g., sharing of own experiences, felt the same emotions), and attachment/attraction-type behaviors (e.g., came physically closer, consoled, made them feel safe and secure) in the helpful interaction condition as compared to the unhelpful interaction.

In sum, these results are consistent with data on the types of preferred sharing partners. They are also in line with the hypothesis that some partners would behave in ways that would match the sharer's particular needs in personal emotional situations. Within the context of intimate relationships, showing interest, sharing new information and knowledge, and providing empathy or support to the sharer are reported as being helpful responses. These behaviors should certainly have consequences. But, what are these effects? In the following, we present new research that addressed this question.

What Are the Helpful Effects of Such Helpful Interactions?

Helpful effects of the partner's behavior may be numerous and could be found at both intrapersonal and interpersonal levels. From an intrapersonal perspective, they could facilitate the cognitive-emotional processing of the emotional episode (Lepore et al., 2000). From an interpersonal perspective, these behaviors could lead to the development or reinforcement of the relationship. In one recall study previously mentioned (Zech, Christophe et al., 2002), participants who had recalled a helpful vs. unhelpful interaction were asked whether they had perceived changes in the way they viewed their emotional episode and their relationship with

the listener. Results revealed that participants in the helpful interaction condition reported that the interaction had changed their view about their emotional experience in a positive way while there was no change in opinion among sharers of the unhelpful interaction. Similarly, the former reported to have changed their opinion about their listener in a positive way, while the latter reported a slight negative influence. Results also revealed that, since the interaction, sharers felt more attached and had exchanged more information. This suggested that a helpful interaction had long-lasting subjective interpersonal consequences between the sharer and the listener. This was further confirmed by an item assessing whether the sharer-listener relationship was likely to continue: Sharers in the helpful interaction evaluated that this was more likely than in the unhelpful interaction.

Because these data may have been subject to a reconstruction bias, the potential effects of a helpful interaction were then further investigated in two experiments where the listener's responses were manipulated. In a first study (Nils, 2002), these two types of behaviors were manipulated in comparison to a control condition. Eighty-five psychology students were asked to come to the laboratory with a good friend. Upon arrival, the friend watched an emotion inducing film. During that time, the experimenter explained to the student that his/her friend was watching an emotional film and that his/her task was thereafter to interact with him/her. They were randomly assigned to one out of three instructions conditions: (1) providing empathy, understanding, and validation to their friend's emotional reactions to the film; or (2) reappraising and minimizing their friend's emotional reactions to the film; or (3) no sharing at all. In the two sharing conditions, the five to ten minutes of conversation were monitored (to check for conformity to instructions). The friend (sharer) then rated the extent to which he/she felt affectively close to the listener, his/her feelings of loneliness, and his/her views about a just world. Results revealed that participants who received empathetic responses felt affectively closer to their listener and less lonely than participants in the

reappraisal and minimization condition. There was also a tendency for those in the empathetic condition to believe more in a just world as compared to participants who were only exposed to the film. Thus, in a sharing situation with an intimate, it seems that empathetic and supportive behaviors of the listener led to more positive effects for the relationship (affective closeness) between the intimates. Consistently, these behaviors were also related to a decrease of loneliness. Finally, they led to partially restore a basic belief that was shattered by the film. This effect could be explained by a feeling of consensus or agreement during the interaction between intimate partners about the challenging information involved in the film.

In a second experiment (Nils & Rimé, 2001), we specifically tested whether agreement or disagreement with the sharer's view point and feelings led to the same effects. The same procedure was used but this time, the sharing partner also varied: Friends were either kept as they arrived (intimate partner), or switched with another student-friend couple, leading to a sharing situation with a stranger. A new set of instructions was given, similar to those used in Lepore et al. (2000), in order to test the effects of the listener's supportive vs. unsupportive responses to the social sharing. One-hundred thirty-one student-confederates were randomly assigned to reply to the sharer (1) showing agreement with the sharer's reactions (e.g., nodded, maintained mutual eye contact, and smiled approvingly while listening to the sharer; agreed with several thoughts and feelings); (2) showing disagreement with the sharer's reactions (e.g., maintained a neutral countenance, avoided eye contact while listening to the sharer, and disagreed with several thoughts and feelings); or (3) showing no reaction (asking only predetermined questions). The same dependent variables were assessed. As could be expected, feelings of closeness to the listener were rated as more intense between intimate partners as compared to strangers. Sharers in the intimate partners condition also felt less lonely as compared to sharers in the strangers condition. In the case of intimate partners, results also indicated that when the listener reacted with disagreement, the sharer reported a

decrease of perceived affective closeness with him/her as compared to the agreement sharing condition. Consistently, they also reported feeling more lonely than in the agreement condition. Consistent with previous results, there was again a tendency for sharers to believe more in a just world when their intimate had reacted with agreement as compared to when he/she had reacted with disagreement. In the case of strangers, when a stranger reacted with agreement to the sharer's emotional reactions, the sharer reported an increase in perceived affective closeness with his/her listener as compared to either the disagreement or no reaction conditions. Type of sharing with a stranger had no effect on loneliness, nor on beliefs in a just world.

Thus, it seems that, when social sharing is perceived as helpful, it is associated with more salient affective bonds among participants of the interaction. The increase of perceived closeness with a stranger who agrees with the sharer's emotional reactions may contribute to the development of new relationships. In support of our hypothesis, social sharing can have lasting affiliative consequences for the relationship between the sharer and the listener, but also for cognitive-affective dimensions related to the impact of the emotional experience.

Emotions are known to challenge the beliefs that people hold in order to preserve a sense of coherence, predictability and control over themselves and the world (Janoff-Bulman, 1992; Parkes, 1972; Tait & Silver, 1989). Hence, emotions elicit a mental "working through" process aimed either at the restoration of beliefs or at finding meaning in the event (e.g. Silver & Wortman, 1980; Tait & Silver, 1989). When intimate listeners react in agreement with the sharer's reactions or when they react with empathy, social sharing was found to play some role in restoring the belief in a just world. Social sharing may thus help complete the cognitive processes elicited by the emotion. In our current studies, we are investigating the extent to which social sharing can also contribute reinstating a person's sense of coherence and predictability, as well as a sense of control and mastery.

These preliminary results should be confirmed by future experimental research. As Horowitz et al. (2001) have noted, the sharing partner's reactions should be helpful only if they match the needs of the sharing person. Future studies will thus investigate both personal and professional emotional situations where needs for getting emotional support or relevant information and reactions may differ. In addition, it will be important to check whether or not the beneficial effects found in the lab after the induction of emotions by a film would still be found after more intense and long-lasting emotional situations. Finally, the investigation of other specific types of listener reactions should be pursued (e.g., providing informational support) as well as their interaction with the manipulation of the characteristics of the listener (e.g., from in- vs. outgroup members, male or female listener).

Conclusions

To sum up, the research described in this chapter was consistently faced with three sets of facts. First, there is overabundant evidence that people who experience an emotion want to talk about it and want to socially share this experience despite the emotional reactivation that is aroused in the process. Second, our studies systematically failed to provide evidence that sharing an emotional experience accelerates emotional recovery. Social sharing would thus not *per se* be an emotion regulation process. Third, in the course of these studies, we very consistently observed that after having shared an emotion, participants expressed positive feelings and subjective benefits. This set of facts raises a number of questions. Why do people want to share their emotions? Why do they have positive feelings after having shared their emotions?

In this chapter, we proposed that the beneficial effects of social sharing would in fact depend on the characteristics of the sharing partners and on their reactions. The reviewed evidence suggested that one does not share with any available person but that sharing partners were chosen according to the relevant information they could provide about coping with

emotions, or according to the warmth and emotional support that they would provide to the sharer. If the listener reacts a certain way, such as with interest and understanding, gives informational support, shows reciprocity-type, and attachment/attraction-type of behaviors, social sharing may well provide help in meeting two fundamental human needs: affiliation and social consensus. We have shown that agreement as well as empathy with the listener led to more affective closeness, to a partial restoration of a belief in a just world, and to a decrease of loneliness. Still, it is not known why this would be so. To be able to answer this question, we need to reconsider what is going on exactly in an emotional experience.

We know that emotion arises from rapid and automatic meaning analyses of supervening events (e.g., Frijda, 1986; Scherer, 1984). For example, if meanings such as "danger", "no control", "no escape" are elicited in a situation one is faced with, a variety of emergency reactions will develop in one's body and one will experience fear. There is however a second wave of meanings in emotion that people are generally unaware of. Situation-specific meanings such as "danger", "no control", "no escape" spread to broader meanings such as "the world is unsafe", "I am vulnerable and helpless", "life is unfair". Meanings of this kind affect how one views the world and how one views oneself. In other words, they pervade one's symbolic universe. What is meant by symbolic universe? In current life, people live and behave under a subjective canopy of apparent order and meaning—a symbolic universe. Because of this, they can face the world and manage it relatively peacefully. Because of this, they can act as if it was normal that they stand here on this planet, somewhere between the Milky Way and Eternity. Emotional events often have the power to undermine this delicate architecture. They challenge the canopy. Traumatic situations have been shown to be particularly deleterious in this regard (Epstein, 1987; Janoff-Bulman, 1992; Parkes, 1972). But any emotion has an impact on this symbolic architecture because emotion precisely develops at its fissures--or where things go unpredicted, unexpected, out-of-control,

etc. By making fissures apparent, emotion makes people feel the weakness of the construction. This is probably the source of this obscure need for cognitive clarification, for understanding, for finding meaning, abundantly reported by people who recently went through some important emotional episode.

Then, why do people also feel the need to be with others and to talk with others after an emotion? It should be stressed that the symbolic universe is anything but a solitary construction. No one could make sense of the world alone. Sociologists showed that people enter a culturally shaped subjective universe early in life (Berger & Luckman, 1967). The attachment process is the basic tool through which the construction is instilled in the young human being. All along the development process, in everyday interactions, parents transmit to their child the view of the world that is shared in their culture. Later on, the construction is kept alive, strong and valid by the social consensus in which everyone takes part minute after minute throughout their life as members of our community. Consequently, a crack in this symbolic universe not only opens a breach in their meanings that will elicit cognitive needs, but it also has the effect of making people feel insecure and lonely, eliciting a very strong urge to re-immersing themselves in the social consensus. These are probably the reasons why after a personal emotion, people feel the need to be with their intimates and to share the emotion with them. Their intimates are those who keep the attachment process alive for them, providing them with social support and security. They are those with whom people share the social consensus, providing them with a coherent subjective universe. Other categories of people could also become relevant after specific emotional circumstances. It is likely that they become relevant sharing partners because they would then be the holders of the social consensus.

Theories on emotion regulation propose that emotional reactions can be enhanced or decreased according to the degree of pleasure or displeasure of the consequences of these

responses. Regulation can affect all the emotion components, i.e., appraisal, experiential, behavioral, and physiological responses (Butler & Gross, this issue; Gross, 1999, 2001). For example, the appraisal of an event may be modified by selective attention and cognitive activities. Should social sharing of emotion be considered as an emotion-regulation strategy? The evidence reviewed in this chapter indicated that being with people who provide social consensus and sharing the emotional experience with them will probably not alter the memory of the emotion and bring emotional relief. This chapter argued that beneficial effects of social sharing depend on the partner's characteristics and reactions rather than on the extent of emotion expression alone. Partner's reactions will be helpful to the extent that they match the sharer's goal for sharing. In some cases, sharers may require partners just to listen, understand, and show support. A corresponding response can then result in enhancing people's affiliative bonds. Changing and regulating the emotional reactions just by receiving support seems less likely. However, if partners, in addition to listening and understanding, provide information that would actually allow a reappraisal of the sharer's experience or a meaning construction – much like what can be done in therapy --this could then allow some emotion regulation to take place. Future studies are of course needed to address these hypotheses.

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