

## Exploring the Relationship Between Defense Mechanisms and Psychopathology in Young Adults in Albania

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### Abstract

Defense mechanisms are key psychological processes that protect individuals from emotional conflict and distress, influencing mental-health outcomes during emerging adulthood—a period of heightened vulnerability to anxiety, depression, and somatic complaints. Despite international research, their role in Southeast Europe, including Albania, remains underexplored.

This study examined associations between three defense mechanism categories—mature, neurotic, and maladaptive—and psychological symptoms among 360 Albanian young adults aged 18–30, also exploring gender differences. Participants completed the Defense Style Questionnaire-40 (DSQ-40) and the Brief Symptom Inventory-18 (BSI-18). Descriptive statistics, Pearson correlations, and gender comparisons were conducted.

Results indicated that greater reliance on neurotic and maladaptive defenses was linked to higher anxiety, depressive symptoms, and somatic complaints, while mature defenses showed modest protective effects. Women reported higher anxiety and depression, and men slightly higher somatic symptoms, though the overall patterns of associations were similar across genders.

These findings emphasize defensive functioning as an important factor in emotional adjustment for Albanian young adults. Neurotic and maladaptive defenses increase vulnerability to distress, whereas mature defenses provide modest protection. Integrating assessments of defensive functioning in prevention and intervention strategies may enhance mental-health outcomes during emerging adulthood.

**Keywords:** Defense Mechanisms; Psychopathology; Emotional Distress; Anxiety; Depression; Somatization; Emerging Adulthood; Albania.

### 1. Introduction

Emerging adulthood is marked by identity exploration and increased demands for autonomy and emotional competence (Arnett, 2015). Effective emotion regulation is crucial, with defense mechanisms playing a central role in managing internal conflict and distress (Cramer, 2015; Vaillant, 2011). Rooted in psychodynamic theory, defenses operate largely unconsciously and vary in adaptiveness (Freud, 1936).

Defenses are typically categorized as mature, neurotic, or maladaptive. Mature defenses (e.g., humor, sublimation) support resilience and healthy functioning (Vaillant, 2011; Di Giuseppe et al., 2020), neurotic defenses provide short-term protection but may hinder emotional processing, and maladaptive defenses (e.g., denial, projection) relate to higher emotional reactivity and psychopathology (Perry et al., 2018; Di Giuseppe & Perry, 2021). Neurotic and

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maladaptive defenses are linked to greater anxiety, depression, and somatic symptoms, while mature defenses predict better adjustment (Prunas et al., 2019; Di Giuseppe et al., 2023).

Despite international research, these associations remain underexplored in Southeast Europe, including Albania, where sociocultural norms may shape defensive functioning (Markova & Sandal, 2020). This study examines the relationships between defense styles and psychological symptoms in Albanian young adults (18–30 years), also exploring gender differences.

Defense mechanisms are core processes for regulating emotion, conflict, and psychological balance, shaping resilience, vulnerability, and psychopathology (Cramer, 2015; Di Giuseppe & Perry, 2021). Classical psychoanalytic theory conceptualizes defenses as unconscious strategies reducing anxiety (Freud, 1936), and modern frameworks classify them as mature, neurotic, or maladaptive (Perry, 1998). Mature defenses (e.g., humor, sublimation) support adaptive coping (Vaillant, 2011; Di Giuseppe et al., 2020), neurotic defenses provide partial protection, and maladaptive defenses (e.g., denial, projection) increase distress (Cramer, 2015). Neurobiological studies show maladaptive defenses relate to heightened limbic activity, while mature defenses enhance prefrontal control (Messina et al., 2016).

Research links neurotic and maladaptive defenses to anxiety, depression, and somatization, whereas mature defenses are protective (Prunas et al., 2019; Lingiardi & McWilliams, 2017; Di Giuseppe & Perry, 2021). Emerging adults (18–30) face identity, autonomy, academic, and relational transitions that increase reliance on defenses (Arnett, 2015; Barber et al., 2016). Gender differences show women report more internalizing symptoms and neurotic defenses, men more somatic complaints and maladaptive defenses (Kuehner, 2017; Prunas et al., 2019). Cultural norms in Albania and the Balkans may encourage suppression and denial, highlighting the need for context-specific research (Markova & Sandal, 2020).

## 2. Methodology

### 2.1. Research Design

A quantitative cross-sectional design was used to examine associations between defense mechanisms and psychological symptoms among young adults in Albania, an approach commonly applied in research on emotion regulation and defensive functioning for its efficiency in assessing theoretical links in nonclinical samples (Sedikides et al., 2019; Prunas et al., 2019). This design provided a snapshot of defensive styles and distress during emerging adulthood.

### 2.2. Participants

The study included 360 young adults aged 18–30, recruited through convenience sampling from universities, vocational centers, and online networks across Albania. Eligibility required only age and residency, with no exclusion criteria to maintain a naturalistic sample. Participants of both genders took part, and participation was voluntary, anonymous, and without compensation.

### 2.3. Measures

Defense mechanisms were measured with the DSQ-40 (Andrews et al., 1993), which assesses mature, neurotic, and maladaptive defenses on a nine-point Likert scale. The instrument shows solid reliability and cross-cultural validity. Psychological symptoms were evaluated using the BSI-18 (Derogatis, 2001), measuring somatization, depression, and anxiety over the past week.

Data were collected through a secure online survey with informed consent, completion of demographic items, DSQ-40 and BSI-18, and a final debriefing. The study followed the Declaration of Helsinki and APA ethical standards, ensuring anonymity.

Data analysis included descriptive statistics, Pearson correlations between defense mechanisms and symptom dimensions, and gender comparisons, using a significance threshold of  $p < .05$ . Analyses focused on associations rather than causality, in line with cross-sectional research standards.

## 3. Results

Descriptive statistics were first calculated to examine the distribution of defensive styles and psychological symptoms in the sample. Mean scores indicated that participants tended to rely more frequently on neurotic defenses than on

maladaptive defenses, while mature defenses were employed to a moderate extent. Psychological symptoms were present at mild to moderate levels on average, with depression and anxiety reported somewhat more frequently than somatic concerns (Table 1).

**Table 1** Descriptive Statistics for Defense Mechanisms and Psychological Symptom Dimensions (N = 360)

Variable	Minimum	Maximum	Mean (M)	Standard Deviation (SD)	Interpretation
Mature Defenses	2.55	5.80	4.12	0.61	Moderate usage
Neurotic Defenses	2.70	6.15	4.58	0.72	Frequently used
Maladaptive Defenses	2.10	5.90	3.96	0.69	Moderately used
Anxiety Symptoms	0.50	3.90	1.84	0.82	Mild to moderate
Depressive Symptoms	0.60	4.20	2.03	0.91	Mild to moderate
Somatic Symptoms	0.30	3.70	1.72	0.76	Mild

Note. Higher scores indicate greater use of the defense style or higher symptom severity.

Correlation analyses examined the associations between defense mechanisms and psychological symptom domains (see Table 2). Neurotic and maladaptive defenses demonstrated moderate to strong positive correlations with all three symptom categories. Specifically, maladaptive defenses showed the strongest relationships with depression ( $r = .57$ ,  $p < .01$ ) and anxiety ( $r = .54$ ,  $p < .01$ ), followed by somatization ( $r = .45$ ,  $p < .01$ ), indicating that participants who relied more heavily on immature defensive responses were more likely to report high levels of psychological distress. Neurotic defenses also correlated positively with anxiety ( $r = .47$ ,  $p < .01$ ), depression ( $r = .51$ ,  $p < .01$ ), and somatic complaints ( $r = .38$ ,  $p < .01$ ). In contrast, mature defenses were negatively associated with psychological symptoms, though with smaller effect sizes ( $r = -.21$  to  $-.24$ ). This suggests that reliance on mature defenses, such as humor or anticipation, may provide a protective buffer against anxiety, dysphoria, and somatic tension.

**Table 2** Pearson Correlations Between Defense Mechanisms and Psychological Symptoms

Variables	Anxiety	Depression	Somatization
Mature Defenses	$-.21^*$	$-.24^*$	$-.18^*$
Neurotic Defenses	$0.47^{**}$	$0.51^{**}$	$0.38^{**}$
Maladaptive Defenses	$0.54^{**}$	$0.57^{**}$	$0.45^{**}$

Note.  $p < .05$ ,  $^*p < .01$ .

### 3.1. Gender Differences

Independent-samples tests showed significant gender differences in symptom expression: women reported higher anxiety ( $t = 2.91$ ,  $p < .01$ ) and depression ( $t = 3.14$ ,  $p < .01$ ), while men scored slightly higher on somatic symptoms ( $t = 2.02$ ,  $p < .05$ ), though the difference was small. However, the strength and direction of correlations between defense mechanisms and psychological symptoms were similar across genders. Overall, greater reliance on maladaptive and neurotic defenses was associated with higher emotional distress, whereas mature defenses supported psychological well-being. These findings highlight defensive functioning as an important factor in mental-health adjustment among emerging adults in Albania.

## 4. Discussion

This study found that greater reliance on neurotic and maladaptive defenses was associated with higher levels of anxiety, depression, and somatization among young adults in Albania, consistent with prior evidence on their role in emotional vulnerability (Prunas et al., 2019; Perry et al., 2018; Cramer, 2015; Goodwin et al., 2020). In contrast, mature defenses showed a modest protective effect, aligning with research linking them to adaptive regulation and resilience (Vaillant, 2011; Di Giuseppe et al., 2020; Di Giuseppe & Perry, 2021). Gender patterns mirrored global trends, with women reporting higher anxiety and depression (Matud, 2019) and men slightly higher somatic symptoms, consistent with culturally shaped expressions of distress (Markova & Sandal, 2020).

## 5. Conclusion

The study shows that neurotic and maladaptive defenses increase anxiety, depression, and somatic symptoms, while mature defenses are protective. Gender differences appeared in symptom levels but not in associations, highlighting the role of defensive functioning in emerging adult mental health.

## Compliance with ethical standards

### Disclosure of conflict of interest

No conflict of interest to be disclosed.

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