

# Aversion to Happiness and Life Satisfaction: Exploring the Role of Psychological Inflexibility and Vulnerability

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Aversion to happiness (AH) is a destructive psychological phenomenon that significantly impacts individuals' well-being. The mediating roles of psychological inflexibility (PI) and psychological vulnerability (PV) in the relationship between AH and life satisfaction (LS) remain an unexplored gap in the literature. Therefore, the aim of this study was to examine the mediating role of PI and PV in the relationship between AH and LS. A total of 404 participants were included in the study (Mage = 22.32 years, SD = 5.20). Structural equation modeling (SEM) and bootstrap analysis were employed to test the study's model. The results from SEM revealed that individuals experiencing aversion to happiness exhibited high levels of psychological inflexibility and psychological vulnerability, along with low life satisfaction. The study confirmed the mediating effects of PI and PV in the relationship between aversion to happiness and life satisfaction. These results suggest that reducing psychological inflexibility and psychological vulnerability may help individuals more effectively manage their aversion to happiness, potentially enhancing overall life satisfaction. Based on these findings, mental health professionals are encouraged to implement interventions aimed at boosting life satisfaction and mitigating the impact of risk factors. Specifically, psychological counselors are advised to apply counseling and psychoeducation interventions designed to enhance life satisfaction and address risk factors. Approaches such as Acceptance and Commitment Therapy (ACT) can help reduce psychological inflexibility in individuals who experience aversion to happiness, while cognitive-behavioral therapy techniques can address psychological vulnerability.

**Keywords:** Aversion to happiness, psychological inflexibility, psychological vulnerability, life satisfaction

Aversion to happiness (or fear of happiness; AH) is associated with a variety of negative life outcomes and has a significant impact on individuals' well-being (Belen et al., 2020; Shar et al., 2019; Yıldırım, 2019). Studies have explored the relationship between AH, a relatively novel concept, and both positive and negative psychological structures (Çevik, 2020). Some of these studies have emphasized that AH is associated with positivity (Togo & Jazz, 2019), development, hope (Belen et al., 2020; Chakraborty & Pandey, 2023), future expectations (Deniz et al., 2022), subjective happiness (Blasco-Belled et al., 2021), resilience (Yıldırım, 2019), and psychological adjustment (Arslan, 2023a). Several studies have suggested that AH is positively correlated with anxiety, stress (Gilbert et al., 2014), alexithymia (Lyvers et al., 2023), hedonic deficits, negative affect interference, depressive symptoms (Jordan et al., 2021), and PV (Elmas, 2022). These findings contradict the belief of individuals with AH, who think that refraining from


happiness ensures their safety and well-being. The results further indicate that the avoidance of positive emotions, such as happiness, can lead to various negative consequences when individuals face life difficulties (Yıldırım, 2019). In fact, a growing body of research reports the association between AH and adverse mental health outcomes, as well as low LS (Elmas, 2022; Joshanloo et al., 2014; Turk et al., 2017; Yıldırım & Aziz, 2017).

Although several studies have explored the relationship between AH and various psychological concepts, further research is needed in this field (De Vuyst et al., 2023; Gilbert et al., 2012). Given that AH may be associated with critical life outcomes, it is crucial to examine this concept and its related structures to gain a comprehensive understanding of the dynamic process of happiness (Yıldırım, 2019). In this regard, we aim to examine the mediating role of PI and PV in the relationship between AH and LS.

## Aversion to Happiness and Life Satisfaction

The phenomenon of aversion to happiness (AH) manifests as a complex psychological state characterized by negative beliefs regarding the nature and consequences of happiness (Arslan, 2023a). This condition encompasses various cognitive distortions, such as the perception that one is undeserving of happiness, that positive

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emotions are transient and perilous, that they elicit competitive behavior and envy from others, that they are acquired through unjust means, or that they inevitably lead to misfortune (Hinks & Davies, 2012; Joshanloo et al., 2014). In this context, AH is a detrimental psychological phenomenon where individuals refrain from experiencing or expressing happiness due to the belief that it leads to negative consequences (Arslan, 2023b; Joshanloo, 2018; Joshanloo, 2023). Numerous studies have examined this phenomenon globally (Belen et al., 2020; De Vuyst et al., 2023). These studies suggest that individuals with AH hold the belief that happiness is threatening and detrimental (Jordan et al., 2021; Joshanloo, 2022; Vanderlin et al., 2017).

Research has revealed that several factors contribute to the development of these beliefs about happiness, including social norms (Elmas, 2022), past traumas (Ahi et al., 2021; Deniz et al., 2022; Shar et al., 2019), personality traits, and cultural influences (Agbo & Ngwu, 2017; Agile, 2020; Isgör, 2022). Joshanloo and Weijers (2014), for instance, provided cultural and empirical evidence for AH, reporting that it stems from the belief that happiness can attract unfavorable events and lead to adverse outcomes, as well as the notion that expressing happiness and seeking happiness are negative actions. The consequences of aversion to happiness, stemming from negative beliefs about happiness, can be substantial and impact individuals' lives in various aspects (Elmas & Çevik, 2024; Türkmen & Sezer, 2023). For example, individuals who experience AH tend to exhibit a higher prevalence of cognitive distortions in their relationships (Elmas, 2022) and may encounter more problems in their social interactions (Yıldırım & Belen, 2018). Moreover, these individuals are more likely to experience mental health issues, such as anxiety and depression, with greater severity (Bloore et al., 2020; Jordan et al., 2021; Lyvers et al., 2023). Consequently, AH can perpetuate a cycle of negativity and discontent unless it is addressed. This cycle can prevent individuals from experiencing life fully, leading to a decrease in their well-being and life satisfaction (LS) (Joshanloo, 2013; Joshanloo et al., 2014; Yıldırım & Belen, 2018).

A significant body of research has confirmed a negative correlation between AH and well-being (Joshanloo et al., 2014; Turk, 2017; Yıldırım & Aziz, 2017). However, some studies suggest that when an individual's values align with those emphasized by society, it correlates positively with their well-being (e.g., Joshanloo & Ghaedi, 2009). Therefore, it seems plausible that being raised in a culture that does not prioritize happiness could lead to the formation of adverse attitudes toward happiness (Joshanloo & Weijers, 2014). On the other hand, Vansteenkiste et al. (2006) demonstrated that the alignment between an individual's personal values and those emphasized by their environment does not significantly influence their overall well-being. This empirical evidence underscores the complex relationship between AH, well-being, and LS (Belen et al., 2020). Still, studies emphasize the need for further research to fully comprehend the factors that influence the extent to which this relationship impacts individuals. In this study, we investigated the relationship between AH and LS, a dominant aspect in collectivist cultures, within a Turkish sample. Additionally, we examined the mediating role of psychological inflexibility and psychological vulnerability, which are predicted to strengthen this relationship due to their characteristics.

### Psychological Inflexibility and Psychological Vulnerability

Psychological inflexibility (PI), as conceptualized within the framework of Acceptance and Commitment Therapy (ACT), refers to the narrowing of an individual's behavioral repertoire and serves as a foundational element of psychopathology (Hayes et al., 2006). PI is a psychological construct that describes individuals' dysfunctional attempts to control their emotions, thoughts, and other internal experiences in order to avoid unpleasant internal and external events (Arslan et al., 2021; Uğur et al., 2021). This construct consists of several sub-processes, including experiential avoidance, where individuals attempt to avoid or control certain feelings, thoughts, or memories (Bond et al., 2011; Hayes et al., 1996; Levin et al., 2014).

PI and experiential avoidance provide a theoretical basis for understanding psychological outcomes (Bond et al., 2011; Yavuz et al., 2016). Previous studies have shown that PI, through its restrictive nature, is associated with a range of psychological problems (Arslan, 2024; Dick et al., 2014; Yao et al., 2023). For example, Levin et al. (2014) found that PI is linked to both current and lifetime symptoms of depression, anxiety disorders, eating disorders, and substance use disorders. Similarly, Ong et al. (2024) reported an association between high levels of PI and poor well-being in their meta-analysis. ACT-based studies also highlight the mediating role of PI (Arslan, 2023c; Gaudiano et al., 2017; Mendoza et al., 2018; Uğur et al., 2021). For instance, Arslan et al. (2021) showed that the relationship between coronavirus-induced stress and psychological distress was mediated by PI. Likewise, Calvo et al. (2022) found that PI mediated the relationship between attachment orientations and well-being.

Further research has revealed a dynamic relationship between PI and mental health, indicating that changes in PI can predict alterations in mental health (Hernández-López et al., 2021). Additionally, studies suggest that experiencing positive emotions and changes in PI are important for maintaining optimal mental health (Silton et al., 2020). However, numerous studies also show that people with high PI tend to avoid positive emotions, which negatively affects their well-being (De Vuyst et al., 2023; Diamond, 2022; Joshanloo et al., 2014; Miron et al., 2015). Based on empirical evidence and theoretical explanations, PI may be a key variable that explains the relationship between aversion to happiness and life satisfaction (Flynn & Bhambhani, 2021; Uğur et al., 2020). Individuals with AH may engage in strict avoidance behaviors to prevent the perceived negative consequences of happiness. They may reject life experiences that could lead to happiness (Belen et al., 2020; Gilbert et al., 2014; Joshanloo, 2018). Such avoidance tendencies can increase PI, as these individuals exert greater control over their thoughts and emotions. Sub-dimensions of PI, such as cognitive fusion and experiential avoidance, can play significant mediating roles in this process. Cognitive fusion, for example, can cause individuals to strongly identify with their thoughts, reinforcing concerns about the negative consequences of happiness. This, in turn, may detrimentally affect overall life satisfaction (Lopez-Crespo et al., 2023). Experiential avoidance, on the other hand, may cause individuals to perceive happiness as a potential threat and attempt to evade it, which can result in deviating from goals aligned with their values (Hayes et al., 2006). Increased AH can further

exacerbate PI, creating a self-reinforcing cycle that diminishes life satisfaction (Joshano, 2013; Joshano et al., 2014). It is hypothesized that cognitive fusion and experiential avoidance, as sub-dimensions of PI, may mediate the relationship between AH and LS (Valdivia-Salas et al., 2022). Understanding these variables may offer insights into the relationship between AH and LS and inform the development of effective interventions. Within the framework of ACT, interventions addressing PI and its subcomponents may enhance the LS of individuals.

Another variable that may influence the relationship between AH and LS is psychological vulnerability (PV). PV refers to cognitive beliefs that cause individuals to determine their self-worth based on external achievements or approval (Sinclair & Wallston, 1999). These beliefs lead to social dependence, negative attitudes, and feelings such as guilt (Arslan et al., 2024; Sinclair & Wallston, 2010). Studies have demonstrated a positive correlation between PV and negative affectivity (Sinclair & Wallston, 1999), as well as between PV and AH (Elmas, 2022). Individuals with high PV may develop hypersensitivity to stressors (Raines et al., 2014) and exhibit avoidance behaviors to prevent the negative consequences of these stressors (Romero-Moreno et al., 2013). They may withdraw from situations that could bring them happiness, engaging in dysfunctional coping behaviors due to the belief that happiness will lead to negative outcomes (Clark et al., 2007; Sinclair & Wallston, 1999). The dynamics of PV can be influenced by factors such as deficiencies in emotion regulation and a tendency toward avoidance behaviors (Elmas, 2022; Yigit, 2023). Individuals' compromised ability to manage negative emotional experiences can reinforce pessimistic beliefs about happiness, thereby impacting their overall LS. Thus, AH may increase PV by reinforcing maladaptive coping behaviors, ultimately negatively affecting subjective well-being (Arslan, 2023; Seller, 2016) and LS (Diamond, 2022; Griffiths et al., 2019; Seller et al., 2016).

In summary, the relationship between AH and LS may be mediated by PI and PV (Valdivia-Salas et al., 2022; Yelpaze et al., 2021). Individuals with high levels of AH may exhibit rigid avoidance behaviors, refusing to engage in activities that could lead to happiness (Joshano, 2018; Yıldırım, 2019). They may also hold maladaptive cognitive beliefs about happiness and develop hypersensitivity to positive emotions. This, in turn, may reduce their LS by perpetuating a cycle of avoidance and self-sabotage (Joshano et al., 2014; Turk et al., 2017).

### The Current Study

Despite recent studies revealing the relationship between aversion to happiness and life satisfaction, limited attention has been given to the factors influencing this relationship, and the mediators involved remain insufficiently understood (De Vuyst et al., 2023; Gilbert et al., 2012). Therefore, in our study, we aim to examine the mediating role of psychological inflexibility and psychological vulnerability in the relationship between aversion to happiness and life satisfaction. We believe the findings from our study will enhance the understanding of how distinctive psychological structures interact with each other. Furthermore, this study is significant due to its potential contribution to the development of appropriate interventions and treatment programs aimed at enhancing individuals' happiness and LS. In line with previous literature, we

hypothesized that AH would directly affect PI, PV, and LS. We also anticipated uncovering an indirect relationship between AH and LS via PI and PV. According to ACT, individuals with high PI may develop greater PV and experience lower LS when confronted with aversion to happiness. According to the theoretical framework of PV, individuals with high levels of PV may experience lower LS when exposed to high levels of AH and PI. Based on these theoretical foundations, we predicted that increased AH would be associated with PI. We also anticipated that increased PI would be associated with higher PV and lower LS, respectively.

Although previous studies have suggested that PI and PV might mediate the relationship between AH and LS, no prior study has directly tested this hypothesis. Therefore, we designed this study to assess the mediating role of PI and PV in the relationship between AH and LS. Within the scope of our study, we propose the following hypotheses: (*H*<sub>1</sub>) Aversion to happiness would have a significant and negative association with life satisfaction and (*H*<sub>2</sub>) psychological flexibility and psychological vulnerability would mediate the relationship between aversion to happiness and life satisfaction.

## Method

### Participants

The sample size should be sufficiently large to detect potential effects between variables. For mediation analyses, samples of 115 to 285 participants are generally adequate to identify possible effects (Fritz & MacKinnon, 2007). However, this study was conducted with a larger population sample ( $n = 404$ ;  $\text{Mage} = 22.32$  years,  $\text{SD} = 5.20$ ), which will both enable the detection of smaller effects and increase the robustness of the study results. In this study, participants were selected using the convenience sampling method. A total of 255 women ( $\text{Mage} = 21.9$  years,  $\text{SD} = 4.74$ , range = 18 to 36) and 149 men ( $\text{Mage} = 23.1$  years,  $\text{SD} = 5.84$ , range = 18 to 38) residing in Türkiye participated in the study. All participants provided written informed consent prior to participation. Of the participants, 152 had an undergraduate education, and the socioeconomic status of 350 participants was classified as medium. The study was approved by the Institutional Review Board (number: 23/6; date: 02.05.2024). Detailed information about the participants is presented in Table 1.

**Table 1.** Participants' characteristics ( $n=404$ )

Variable	Frequency	Percent
Gender	Male	149
	Female	255
Education level	High school or below	125
	Associate degree	109
	Bachelor's degree	152
	Postgraduate	18
Socioeconomic status	Low	32
	Medium	350
	High	22

### Measures

**Fear of Happiness Scale (FHS).** The Fear of Happiness Scale (FHS), developed by Joshano et al. (2014), was used to measure individuals' aversion to happiness. This is a 5-point self-report scale, with items such as "Being too enjoyable and fun causes bad things

to happen." The scale uses a 7-point Likert scale, ranging from strongly disagree (1) to strongly agree (7). The scale is unidimensional, meaning all items contribute to a single score, with no reverse-scored items. The total score is the sum of the item scores, and higher scores reflect a greater fear of happiness. In this study, the internal consistency of the FHS was found to be 0.90.

**Acceptance and Action Questionnaire II (AAQ-II).** The AAQ-II, developed by Bond et al. (2011), is a 7-point Likert scale used to assess psychological inflexibility (PI). The scale ranges from never accurate (1) to always accurate (7), with 7 items (e.g., "Emotions cause problems in my life"). It is unidimensional, meaning all items are intended to measure the same construct. Higher scores indicate greater psychological inflexibility. In this study, the internal consistency coefficient of the AAQ-II was 0.89.

**Psychological Vulnerability Scale (PV).** The Psychological Vulnerability Scale, developed by Sinclair and Wallston (1999), measures levels of psychological vulnerability (PV). It contains 6 items (e.g., "I tend to set my goals too high and get frustrated when I try to achieve them"). The scale uses a 5-point Likert scale, with responses ranging from not suitable for me at all (1) to completely suitable for me (5). Higher scores indicate higher levels of psychological vulnerability. In this study, the internal consistency coefficient (Cronbach's alpha) of the PV scale was 0.91.

**Life Satisfaction Scale (LS).** The Life Satisfaction Scale, developed by Lavalley et al. (2007), is used to assess individuals' overall satisfaction with life. The scale consists of 5 items (e.g., "I am satisfied with my life"), with items 3 and 4 reverse-scored. It uses a 7-point Likert scale, ranging from strongly disagree (1) to strongly agree (7). Higher scores indicate greater life satisfaction. In this study, the internal consistency coefficient (Cronbach's alpha) for the LS scale was found to be 0.93.

### Procedure

Data for the study were collected online, which included obtaining written consent and gathering personal information forms, as well as ensuring participants met the study criteria. Prior to completing the survey, participants were provided with an informed consent form. The data were collected anonymously. The questionnaires took approximately 7 to 10 minutes to complete. All participants agreed to participate and were able to complete the questionnaires as required by the survey design. Data collection occurred between May 3 and 10, 2024. Ethical approval for the study was obtained from the relevant ethics committee, and the research was conducted in accordance with the 1964 Declaration of Helsinki.

### Data Analyses

Various data analyses were conducted to investigate the mediating role of psychological inflexibility and psychological vulnerability in the relationship between aversion to happiness and life satisfaction. Preliminary analyses included checks for normality, observed scale characteristics, and correlation analysis. The normality assumption was assessed using kurtosis and skewness scores, with values lower than |1.5| considered acceptable. The skewness and kurtosis values were as follows: AH (-.01, -.39), PI (.04, -.71), PV (-.44, -1.20), and LS (.50, -1.08). All values were within the acceptable range for normal distribution (Tabachnick & Fidell, 2013).

Pearson correlation analysis was conducted to examine the relationships between the study variables, revealing significant correlations among all variables ( $p < .001$ ). A variety of fit indices were used to analyze the mediation model, including the chi-square goodness of fit test, GFI, AGFI, CFI, NFI, TLI, RMSEA, and SRMR. The test results for the measurement model were:  $\chi^2/df = 2.03$ , AGFI = .91, CFI = .97, NFI = .94, TLI = .96, RMSEA = .05, and SRMR = .03. These values suggest that the measurement model demonstrates an acceptable fit (Hu & Bentler, 1999; Kline, 2015). The bootstrapping method was used to test the mediation effect, with 5000 bootstrap samples and a 95% confidence interval. The bootstrapping analysis revealed that PI and PV partially mediated the relationship between AH and LS (95% CI [-.80, -.40]). Data analyses were performed using SPSS version 25 and AMOS version 24.

## Results

### Preliminary Analysis

Findings from the preliminary analysis showed that skewness and kurtosis ranged from -.01 to -1.20 (skewness and kurtosis scores  $< |1.5|$ ); revealing that all variables within the study exhibited a relatively normal distribution (Tabachnick & Fidell, 2013). Internal reliability estimates of the analyzed variables ranged from 0.89 to 0.93; indicating sufficient-strong internal reliability coefficients. Two-variable correlation analyses revealed a moderate, positive and significant correlation between AH and PI ( $r = .68, p < .001$ ), a high-level, positive and significant relationship between AH and PV ( $r = .81, p < .001$ ), and a high, negative and significant correlation between AH and LS ( $r = -.73, p < .001$ ). In addition, a high, positive and significant correlation between PI and PV ( $r = .73, p < .001$ ), as well as moderate, negative and significant correlation between PI and LS ( $r = -.66, p < .001$ ) was detected. Finally, a high, negative and significant correlation between PV and LS ( $r = -.78, p < .001$ ) was found. An examination of the data reveals no evidence of multicollinearity. Multicollinearity is typically considered present when correlations exceed .90, the reference value (Ullman, 2013). Given these findings, the conditions are suitable for proceeding with further analysis. The results of the observed scale characteristics and correlation analyses are presented in Table 2.

### Structural Equation Modeling

Structural equation modeling (SEM) was used to examine the mediating role of PI and PV in the relationship between AH and LS. The results indicated that the model demonstrated a good to excellent fit ( $\chi^2/df = 2.03$ , AGFI = .91, CFI = .97, NFI = .94, TLI = .96, RMSEA = .05, SRMR = .03) (Hu & Bentler, 1999; Kline, 2015). Additionally, standardized regression estimates, as presented in Table 3 and Figure 1, revealed that AH significantly and positively predicted PI ( $\beta = .75, t = 12.16, p < .001$ ) and PV ( $\beta = .63, t = 10.30, p < .001$ ), while significantly and negatively predicting LS ( $\beta = -.19, t = -2.12, p < .05$ ). Furthermore, PI positively predicted PV ( $\beta = .34, t = 6.09, p < .001$ ) and negatively predicted LS ( $\beta = -.14, t = -2.20, p < .001$ ). Additionally, PV had a significant negative effect on LS ( $\beta = -.56, t = -5.28, p < .001$ ). The results of the model are presented in Figure 1.

**Table 2.** Descriptive statistics and correlation results

Scales	<i>M</i>	<i>SD</i>	Skew	Kurt	<i>a</i>	1	2	3	4
1. Aversion to happiness	20.29	6.77	-.01	-.39	.90	—	.68**	.81**	-.73**
2. Psychological inflexibility	27.02	10.47	.04	-.71	.89		—	.73**	-.66**
3. Psychological vulnerability	19.46	6.89	-.44	-1.20	.91			—	-.78**
4. Life satisfaction	18.00	8.02	.50	-1.08	.93				—

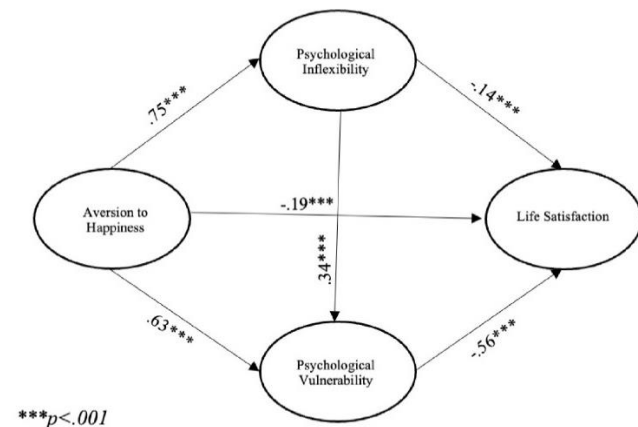
Note. \*\*  $p < .001$

The analysis also indicated that PI and PV partially mediated the relationship between AH and LS. Specifically, AH had a 25% significant indirect effect on LS via the PI mediator, while PI demonstrated a 19% significant indirect effect on LS through the PV mediator. Moreover, AH exhibited a 60% indirect effect on LS via both PI and PV mediators. The standardized indirect effects of the model are presented in Table 4.

**Table 3.** Standardized direct effects

Variables	$\beta$
Aversion to happiness---->Psychological Inflexibility	.75**
Aversion to happiness---->Psychological Vulnerability	.63**
Aversion to happiness----> Life Satisfaction	-.19*
Psychological Inflexibility----> Psychological Vulnerability	.34**
Psychological Inflexibility----> Life Satisfaction	-.14*
Psychological Vulnerability----> Life Satisfaction	-.56**

Note. \*  $p < .05$ , \*\*  $p < .001$

**Figure 1.** Structural equation model

## Discussion

Aversion to happiness is of significant importance due to its association with individuals' key life outcomes and its impact on overall well-being (Joshani, 2018; Joshani, 2023; Yildirim, 2019). Numerous studies have highlighted the link between AH and mental health issues (Bloore et al., 2020; Gilbert et al., 2014; Jordan et al., 2021; Lyvers et al., 2023). Researchers have emphasized the need for robust, evidence-based studies examining AH and its associated psychological structures (Belen et al., 2020; De Vuyst et al., 2023; Gilbert et al., 2012). In response to this call, the present study aims to investigate the mediating role of PI and PV in the relationship between AH and LS.

The findings of this study not only confirm a negative correlation between AH and LS but also reveal a positive correlation between

AH and both PI and PV. Furthermore, the results demonstrate that the relationship between AH and LS is mediated by PI and PV. While prior research has provided evidence of AH's impact on LS (Elmas, 2022; Joshani, 2013), no studies have simultaneously examined the mediating roles of PI and PV in this relationship, underscoring the significance of the current investigation. Most existing studies have focused on the relationship between AH and indicators of poor mental health and reduced well-being (Bloore et al., 2020; Gilbert et al., 2014; Jordan et al., 2021; Lyvers et al., 2023; Lightning & Belen, 2018). However, limited research has explored the impact of AH on PI and PV. In this regard, the present study contributes to the literature by shedding light on the influence of AH on these psychological constructs.

We revealed that individuals with high levels of AH reported lower LS. This finding aligns with various studies in the literature (Joshani et al., 2014). However, previous research has presented diverse results regarding the relationship between societal values, individual values, and well-being indicators (Joshani & Ghaedi, 2009; Vansteenkiste et al., 2006). Additionally, studies suggest that AH may stem from cultural influences (Joshani & Weijers, 2014), emphasizing that the relationship between AH and well-being indicators is multifaceted and complex (Belen et al., 2020). Moreover, research indicates that AH may be more prevalent in cultures where collective well-being is prioritized over individual well-being, and where collectivist values dominate (Çevik, 2020). In Türkiye, for instance, frequent laughter is sometimes considered inappropriate due to a widespread belief that excessive laughter may invite misfortune. Furthermore, there is a cultural notion that experiencing happiness may elicit jealousy from others, leading individuals to suppress their happiness to protect against the "evil eye" (Türk et al., 2017). This dynamic may reduce LS by causing individuals to suppress their true emotions and avoid activities that promote happiness and its expression.

Indeed, studies conducted with Turkish samples have demonstrated a relationship between high levels of AH in society and lower LS. For example, Yıldırım and Aziz (2017) found a negative correlation between AH and LS in their study examining the psychometric properties of the Turkish version of the AH scale. Similarly, Türk et al. (2017) identified a negative correlation between AH and LS in a sample of Turkish youth. These findings are consistent with the results of the present study conducted with a Turkish sample. While most previous studies in Türkiye have examined the direct relationship between AH and LS, this study goes further by exploring the negative impact of AH on LS through psychological processes and linking it to cultural context. By providing a more comprehensive analysis, this research expands the existing knowledge in the field and offers a novel perspective on how cultural factors shape the effects of AH on LS.

**Table 4.** Standardized indirect effects

Model	Indirect	BC 95% CI	
		Lower	Upper
Aversion to happiness --->Psychological Inflexibility--->Psychological Vulnerability	.25	.17	.34
Psychological Inflexibility---> Psychological Vulnerability---> Life Satisfaction	-.19	-.31	-.10
Aversion to happiness ---> Psychological Inflexibility → Psychological Vulnerability---> Life Satisfaction	-.60	-.80	-.40

Note. BC 95% CI for standardized indirect effects = Bootstrapped bias-corrected and accelerated confidence interval with sample 5000

Based on the study findings, individuals with high levels of AH exhibit greater PI and PV. This relationship appears reasonable given its nature. Individuals with high levels of AH may engage in maladaptive coping behaviors to avoid activities that could potentially induce happiness, fearing the negative consequences associated with experiencing joy (Arslan et al., 2021; Uğur et al., 2021). In the context of ACT, the frequent use of such coping behaviors sustains the cycle of PI (Hayes et al., 1996; Levin et al., 2014). Additionally, individuals with high AH may experience intense anxiety and guilt when they feel happy (Sinclair & Wallston, 2010). According to the PV model, these individuals may actively undermine their own happiness to avoid discomfort (Clark et al., 2007; Sinclair & Wallston, 1999). As a result, they exhibit higher levels of both PI and PV when faced with AH. Consistent with this theoretical framework, previous studies have demonstrated that aversion to happiness is associated with adverse mental health indicators. For example, Gilbert et al. (2014) found that both fear of affection and AH were strongly linked to alexithymia and depression. Miron et al. (2015) identified a positive correlation between PI and fear of compassion. Similarly, Elmas (2022) reported a negative correlation between AH and LS, as well as a positive correlation between AH and PV. These findings align with the results of the present study, further supporting the significant impact of AH on PI and PV.

In conclusion, this study demonstrated that the relationship between AH and LS is mediated by PI and PV (H3). This result supports both theoretical literature and empirical evidence highlighting the mediating roles of PI and PV. For instance, Valdivia-Salas et al. (2022) found that PI mediated the relationship between valuing happiness and psychological well-being. Similarly, Yelpeze et al. (2021) reported that PV mediated the relationship between social connection and well-being, further observing a negative correlation between subjective happiness and PV. Additionally, several studies have identified a positive correlation between AH and negative psychological outcomes, as well as between PI and PV (Uğur et al., 2020). These studies also demonstrated that LS is negatively correlated with both PI (Flynn & Bhambhani, 2021) and PV (Elmas, 2022). Taken together, these findings highlight that PI and PV are significant psychological factors that further decrease LS among individuals experiencing AH. This study contributes to the understanding of the mechanisms through which AH negatively impacts psychological health, shedding light on how maladaptive coping strategies in response to the perceived negative consequences of happiness sustain PI and its relationship with PV. Furthermore, by emphasizing AH as a critical factor in psychotherapy and intervention strategies, this research offers valuable insights for practical applications in the field.

### Limitations and Future Directions

This study offers significant implications for future research and practice; however, it also has several limitations. First, the study employed a cross-sectional design, which prevents researchers from drawing conclusions about causal relationships. Future studies could address this limitation by utilizing experimental and longitudinal designs to establish causality. Second, the data were limited to participants' self-reports, which may introduce response biases. Future research could incorporate multiple assessment methods, such as behavioral measures or third-party evaluations, to provide a more comprehensive understanding of the study variables. Third, the study was conducted with a Turkish sample, and the majority of participants were women. To enhance generalizability, future studies should include larger and more culturally diverse samples.

Despite these limitations, the study provides valuable insights for practical interventions. AH has been shown to have strong negative effects on well-being indicators (Belen et al., 2020; Shar et al., 2019; Yildirim, 2019). Moreover, PI and PV serve as significant risk factors that exacerbate these negative effects (Valdivia-Salas et al., 2022; Yelpeze et al., 2021). Therefore, reducing AH, PI, and PV while promoting LS could contribute to enhancing societal well-being. In this context, psychological counselors can develop interventions through counseling and psychoeducation programs to mitigate these risk factors and improve LS. Therapeutic approaches such as ACT have demonstrated efficacy in reducing PI by decreasing rigid avoidant behaviors, fostering psychological flexibility, and encouraging value-driven actions (Uğur et al., 2021). Additionally, cognitive and behavioral therapeutic strategies can effectively reduce PV by addressing maladaptive cognitive patterns (Sinclair & Wallston, 1999). These targeted interventions hold the potential to directly enhance individuals' LS. Furthermore, educators and mental health professionals can play a crucial role in identifying both explicit and implicit factors contributing to AH, particularly within its cultural context. Implementing school- and family-oriented programs could help individuals recognize the sociocultural influences that heighten their apprehension about happiness. Such initiatives, including educational seminars, may foster a more comprehensive societal understanding of AH and its psychological impact.

### Conclusion

This study found that PI and PV partially mediate the relationship between AH and LS. Higher levels of AH were associated with increased PI and PV, as well as lower LS. These findings suggest that reducing PI and PV may help individuals manage AH more effectively, potentially improving LS. In this context, psychological counselors are encouraged to implement counseling and psychoeducation interventions aimed at enhancing

LS and mitigating risk factors. ACT-based approaches may be particularly effective in reducing PI among individuals experiencing AH, while cognitive-behavioral therapy techniques can help address PV.

### Compliance with Ethical Standards

**Disclosure of Potential Conflicts of Interest.** The authors declare no conflicts of interest regarding the research, authorship, or publication of this article.

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**Ethical Approval.** All procedures involving human participants adhered to the ethical standards of the institutional and/or national research committee and the 1964 Helsinki Declaration and its subsequent amendments or comparable ethical guidelines. Ethics committee approval was obtained prior to conducting the study (number: 23/6; date: 02.05.2024).

**Informed Consent.** Written informed consent was obtained from all participants.

**Data Availability.** The datasets generated and/or analyzed during this study are available from the corresponding author upon reasonable request.

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