

Emotional Well-being Research: A Narrative Review

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ABSTRACT

A review of the current literature on emotional well-being (2024-2025) can be organized by different topics including positive effects, risk factors for low emotional well-being, a potential underlying biological mechanism for emotional well-being and buffers and interventions for enhancing emotional well-being. The only studies on positive effects of emotional well-being include increasing social well-being and subjective health. The several studies on risk factors for low emotional well-being are focused on adverse childhood experiences, negative effects of COVID-19, having an evening chronotype, sleep problems and emotional problems including stress, negative emotions and depression. A potential underlying biological mechanism for emotional well-being was based on fMRIs that suggested a negative association between emotional well-being and default network connectivity (initial connections by the brain rather than new connections). Buffers for emotional well-being have included socializing, having a conversation app, practicing healthy eating habits and diet, exercise, perceiving subjective health, having a positive body image, and having emotional intelligence and quality of life. Interventions for enhancing emotional well-being have included being in plant environments, being digitally engaged, writing, Zentangling (drawing designs) and music therapy. Methodological limitations of this current literature are the confounding of emotional well-being by social and psychological well-being as well as the relative absence of studies that are focused on positive effects and potential underlying biological mechanisms for emotional well-being.

Emotional well-being has been defined as experiencing positive emotions, managing stress, and having a sense of contentment and meaning. In this current literature, the research on emotional well-being (2024-2025) has been confounded by other forms of well-being including social well-being, defined as developing and maintaining positive relationships and having a strong support network and psychological well-being, described as self-acceptance, a sense of purpose and personal growth.

In this narrative review, research on emotional well-being that was published in 2024-2025 is briefly summarized. This research was found on PubMed and PsycINFO by entering the terms emotional well-being and the years 2024-2025. Exclusion criteria included proposed protocols, pilot studies and non-English papers.

The current literature on emotional well-being can be organized as positive effects of emotional well-being, risk factors for low emotional well-being, a potential underlying

biological mechanism for emotional well-being, and buffers and interventions for enhancing emotional well-being. Of the 26 papers included, 2 are focused on positive effects of well-being, 7 on risk factors/predictors of low emotional well-being, 2 on potential underlying biological mechanisms, 8 on buffers for protecting emotional well-being and 7 on interventions for enhancing well-being.

Positive Effects of Emotional Well-being

The positive effects of emotional well-being have included enhancing social well-being and subjective health. Interestingly, only a couple papers on these two effects could be found in this current literature on positive effects of emotional well-being, probably because positive effects have been assumed to follow from emotional well-being. And most psychological literature is focused on the negative rather than positive effects.

In one study, emotional well-being led to **social and psychological well-being** and vice versa [1]. These reciprocal

relationships were not surprising given the similarities of these types of well-being. In some studies, these three types of well-being are compared, in others they are interchangeable and in still other research, they are confounding variables.

Risk Factors/Predictors for Low Emotional Well-being

Several risk factors/predictors have been noted for low emotional well-being. These can be categorized as external factors, behavioral problems and negative emotions.

Table 1: Risks/Predictors of emotional well-being (and first authors).

Risks/Predictors	First Authors
External	
Adverse childhood experiences	Yao
COVID-19 pandemic	Kyrolainen
Behavioral	
Evening chronotype	Lan
Less sleep efficiency	Liu
Emotional	
Stress	Ansari
Negative emotions	Allemand
Depression	Suveyi

Several risk factors/predictors have been noted for low emotional well-being. These can be categorized as external factors, behavioral problems and negative emotions.

External Factors

External factors have included **adverse childhood experiences** and Covid-19-related problems. In a systematic review and meta-analysis entitled "Associations of childhood adversity with emotional well-being and educational achievement" (N= 100 studies), adverse childhood experiences led to lower emotional well-being and less academic achievement [3]. These associations, not surprisingly, were greater for childhood abuse than for household dysfunction, but, surprisingly, no gender differences were noted given that female children have typically experienced more abuse. Problematically, no standardized measures were used for emotional well-being.

The **COVID –19 pandemic** has also impacted the emotional well-being of adults as well as their cognitive and social well-being [4]. These effects were based on a data set of 1.8 million words from narratives of 1300 adults (55-years-old and older) that were recorded before, during and after the lockdown. Interestingly, there was a delayed and abrupt decrease in optimism and an increase in negative emotions that reached a peak at seven months after the lockdown and returned to pre-pandemic levels one year later. Notably, the word loneliness was the most frequently occurring word in this collection of words.

Behavioral Problems

Behavioral problems have been related to sleep disturbances in this literature, including having an **evening chronotype** (preference for being active in the evening) and less sleep efficiency. In a paper entitled "Chronotypes are significantly

associated with emotional well-being in a general population cohort in Hungary" (N= 1120), those with an evening chronotype had less emotional well-being, likely because they were sleep deprived and having more difficulty functioning during their daytime activities [5].

Poor sleep has been a risk factor for low emotional well-being in another sample. In a paper entitled "Sleep bad, feel bad: unpacking the role of exercise and socializing", daily diaries were kept over a 20-day period (N= 1455, mean age = 42) [6]. Based on these daily diaries, **less sleep efficiency** led to more negative and less positive emotional well-being. The extremes of both longer and shorter sleep were associated with less emotional well-being, as might be expected.

Emotional Problems

Emotional problems that have compromised emotional well-being have included stress, negative emotions and depression. A systematic review and meta-analysis of 46 studies on the association between stress and emotional well-being included samples of non-medical college students (N=26,214, mean age=22) [7]. Not surprisingly, negative relationships were noted between stress, negative emotions, depression and emotional well-being.

In a paper entitled "Negative emotional reactivity and somatic symptoms during adolescence predict adult health and well-being in early and middle adulthood", adolescents (N=1527) were seen between the ages of 12 and 16 years, and then they were seen again in middle adulthood (35 to 45 years) [8]. **Negative emotions** during adolescence were negatively related to adult health and emotional well-being. Again, the lengthy time gaps between the baseline assessments in adolescence and the follow-up assessments in middle-adulthood (as many as 33 years) challenge the reliability of these memory-based, self-report data.

Depression has also contributed to less emotional well-being as well as less health [9]. In that study, as much as 71% of the variance in emotional well-being was negatively associated with depression, and positively related to receptiveness, mental well-being, and connectedness. Despite this total variance figure, the amount of variance explained by each of these variables would have been more informative for intervention purposes.

Potential Underlying Biological Mechanism for Emotional Well-being

Brain network functional connectivity was one of two potential underlying biological mechanisms suggested for emotional well-being in this current literature [10]. Data from fMRIs revealed a positive relationship between default network connectivity and negative emotions. This involved amygdala-ventromedial prefrontal cortex connectivity being negatively associated with emotional well-being. These data were not surprising given that these regions have been notably associated with emotions in several studies [11].

Buffers for Emotional Well-being

Several buffers have been noted for emotional well-being in this literature. They include socializing, conversation apps, healthy diet, exercise, subjective health, positive body image, emotional intelligence and quality of life.

Table 2: Buffers for enhancing emotional well-being (and first authors).

Buffers	First Authors
Socializing	Liu
Conversation app	Brinberg
Healthy food and eating habits	Vaughn
Ketogenic diet	Garner
Exercise	Liu
Subjective health	Majouskiene
Positive body image	Modica
Emotional intelligence	Salavera
Quality of life	Lopez

In a study already cited, **socializing** was noted as a buffer for the emotional well-being effects on sleep and on reducing negative affect [12]. Similarly, a **conversation app** has been noted to buffer emotional well-being. In a study entitled “How our conversation via an on-demand peer-to-peer emotional well-being app was associated with emotional improvement”, face-to-face peer conversations (N=1000) called “HeartMe” enhanced emotional well-being [13]. Verbal, but not emotional, synchrony led to emotional improvement. This finding may have resulted from verbal synchrony being more easily and reliably measured than emotional synchrony.

In a paper entitled “Quality of life and the role of food and eating as described by community-dwelling older adults” (N= 25), **healthy food and eating habits** were buffers for emotional well-being and quality of life [14]. Other buffers were health and vitality, independence, socialization and support as well as activities. Unfortunately, once again, the relative variance explained by each of these buffers was not determined. Knowing their relative importance would help inform intervention efforts.

A specific **ketogenic diet** has had buffering effects on both mental and emotional well-being in the general population (N= 423) [15]. The ketogenic diet that includes high fat, moderate protein and low carbohydrates is a nutritional fasting diet that provides an alternative to glucose for fuel sources. This diet buffered emotional well-being by contributing to calmness, contentedness and alertness as well as by reducing cognitive and emotional stress, depression, anxiety and loneliness. Although the keto diet yielded several positive effects in this sample and has been increasingly popular, it has also been increasingly controversial.

Exercise, not surprisingly, has had a buffering effect on emotional well-being including reducing negative emotions and poor sleep [6]. Healthy diet and exercise have invariably buffered problems like these [16].

Given the buffering effects of healthy diet and exercise, it is perhaps not surprising that “**subjective health**” (self-reported assessment of overall physical, psychological and emotional well-being) also has buffering effects on emotional well-being. In a study entitled “Beyond lifestyle, logic and empathy, subjective health, mood, emotional and intellectual well-being and personality are keys to well-being for women and men” (N=

831 females, 309 males 18 to 64 years of age), the title reflects the results [17]. Subjective health was a buffer for emotional well-being in both men and women. Extroversion was an additional buffer for women and neuroticism for men.

A **positive body image**, that might result from subjective health, has also been noted to have buffering effects on emotional well-being. In a longitudinal study on young adult women (N= 490 18-35-year-old women in the U.S.), a unidirectional association was noted between body appreciation and emotional well-being [18]. A positive body image was also negatively related to depression.

Emotional intelligence (self-regulation of emotions) has been, not surprisingly, a buffer for emotional well-being which, in turn, has predicted happiness [9]. Given all these positive associations, it is not surprising that **Quality of life** has also been a buffer for emotional well-being. Quality of life has been ascribed to better health, personal growth and purpose in life as well as lower anxiety and depression in an adult sample (N=361 adults 68 years-old) [19]. These variables together explained as much as 63% of the variance in emotional well-being in this sample.

Interventions for Enhancing Emotional Well-being

Several interventions have been noted to enhance emotional well-being. They include being exposed to plant environments, digital engagement, writing, Zentangling, artificial intelligence and music therapy.

Table 3: Interventions for enhancing emotional well-being (and first authors).

Interventions	First Authors
Exposure to a plant environment	Yao
Virtual nature	Finkler
Digital engagement	Liu
Expressive writing	Hoult
Zentangling	Usman
Sensory and artificial intelligence	Zamani
Music therapy	Feng

At least two studies have been reported in this literature that involved **exposure to a plant environment**. In one study, mixed coniferous plants led to decreased physical stress (N= 60 volunteers) [20]. The combination of coniferous and broadleaf plants/trees led to a decrease in diastolic blood pressure and an increase in vigor.

In a study on exposure to **virtual nature**, 360° of virtual reality nature was provided (N= 63) [21]. Increases were noted in emotional well-being and positive emotions, but no changes in negative emotions were observed. The authors referred to this exposure as “nature connectedness”.

Data from the China longitudinal Aging Social Survey has suggested that emotional well-being as well as cognitive performance can be increased by **digital engagement** [12]. A mechanistic analysis revealed that emotional well-being was

increased and depression was decreased by alleviating loneliness.

In a systematic review on 51 studies entitled “Positive **expressive writing** interventions, subjective health, and well-being in non— clinical populations”, writing had positive effects on psychological health (stress, anxiety) and physical health [22]. Self and gratitude (best possible self) interventions were the most effective.

Zentangling (drawing repeated patterns) has also been effective for increasing emotional well-being and reducing stress levels (N= 30) [23]. In this sample, zentangling was associated with increased concentration and emotional calmness and reduced stress and anxiety. EEGs showed a decrease in delta power (typically associated with sleep) and increases in theta (relaxation), beta (concentration), and gamma power (cognitive and emotional processing).

Emotional well-being has also been the focus of a systematic review of 42 intervention studies called the “Internet of things” [24]. **Sensors and artificial intelligence** were used for detecting, analyzing and monitoring emotions and depression and providing therapeutic intervention to enhance emotional well-being. These data are limited by the sample being socially isolated adults as well as some of the sample having mild cognitive impairment (N= 50 adults 75 years old plus, 30 with mild cognitive impairment and 20 without cognitive impairment). Presumably this intervention was more effective for those with cognitive impairment

Music therapy has also been effective for increasing emotional well-being [25]. Following an eight-week therapy period (N= 256), music therapy led to increased emotional resilience and emotional well-being that, in turn, led to greater employability. The younger and more educated benefited more from the music therapy. They were likely more employable because they were younger and had more education.

Methodological Limitations of this Literature

This current literature on emotional well-being has several methodological limitations. They include problems with sampling, methods and data analysis.

Most of the samples were **older adults** which limits the generalizability of the data. This was surprising as most studies on emotions have sampled university students as convenience samples. Some of the samples ranged across **different sample sizes** which limits the reliability of the memory-based, self-report data. A couple studies had significantly different sample sizes for males and females, making gender comparisons questionable.

Although most of the samples were **cross-sectional**, a few longitudinal studies appeared in this literature. Problematically, the time span between the independent measure and the dependent variable was so long that reporting may have been unreliable. For example, the negative effects of childhood maltreatment were measured in late adulthood.

Emotional well-being was compared to other forms of well-being, for example social and psychological well-being in some

studies. However, in other studies, emotional well-being was **confounded by other forms of well-being** including social well-being and psychological well-being, making it difficult to identify the unique effects of emotional well-being.

Only a couple papers could be found on the positive effects of emotional well-being, likely because positive effects have been assumed to follow from emotional well-being. And most psychological literature is focused on negative as opposed to positive effects. To that point, most of the studies in this current literature were focused on the risks of low emotional well-being, and **buffers and interventions to prevent low well-being** or to enhance emotional well-being.

The buffers were the obvious buffers for any quality-of-life variable including socializing, healthy diet and exercise. Several of the papers on interventions were **systematic reviews**, making it difficult to critique methodologies of the studies included in the reviews. The interventions themselves were **intellectual exercises** including writing and zentangling which possibly limited the efficacy of the interventions to relatively sophisticated participants.

The only potential underlying biological mechanisms were explored in two studies. The physiological data included EEG data that suggested **contradictory EEG waveforms** associated with both relaxation and activation and fMRI data that suggested the activation of **several different regions of the brain**.

Despite these methodological limitations, this literature has suggested buffers and interventions that effectively enhance emotional well-being. The relative absence of studies on underlying mechanisms highlights the importance of continuing research on emotional well-being.

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