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5. The situational and emotional context of adult crying

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Why and when crying occurs in adults still is a mystery in many respects. The close association of crying with sadness is well known. However, crying is also common in situations where sadness is not the predominant emotion. For example, people cry at positive events like weddings, sports games and situations in which they are not threatened themselves in any way but feel happy or empathize with others who are in distress. Moreover, persons can employ crying in order to manipulate others. In addition, several personal and situational characteristics can influence the probability of shedding tears. For example, fatigue, the presence of others, and so-called display rules all may inhibit or facilitate weeping.

In babies and young children, crying is generally considered as a sign of distress or pain in response to pre- or perinatal trauma, unfulfilled basic needs, overstimulation, developmental frustrations, physical pain, or frightening experiences (e.g., Lester, 1984; Solter, 1995; see also Chapter 3, this volume for the developmental aspects). The situation for adult crying, however, appears to be far more complex. As a matter of fact, it is still largely unknown why adults cry and what the function of their crying is.

In adults, both contextual and intrinsic factors can trigger a crying response and lower or increase the threshold for shedding tears. Emotional and situational contexts are very powerful in this respect. Particular situations or events will induce a specific emotional state if they have been appraised in a certain way. In turn, particular emotional states can elicit a crying response. However, several cultural, personal, social and cultural factors may stimulate or inhibit tears. It is our conviction that a thorough investigation of the context of crying may help broadening our insights into the crying phenomenon. Therefore, this chapter focuses on the antecedents and context of adult crying, specifically the emotional and situational context. For personal, social and cultural aspects see Chapters 7, 8, and 9 in this volume. First, it will be explored what makes people cry. Theories on crying will be discussed briefly, as they are relevant for the present issue. Then, the literature on situations and emotions which stimulate tears to flow will be reviewed and summarized. In the last part of this chapter, attention is directed at the broader context of crying. Major questions are: *where* and *when* do people cry, and *who is present* when they do? Attention will be paid to the circumstances in which people cry and to temporal aspects such as the most likely time of the day that people cry. So, the aim is to summarize what is known about the conditions that trigger and moderate a crying response.

Theorizing about the causes of crying

Scientists with different backgrounds such as ethologists, anthropologists, psychologists, psychoanalysts, and biochemists, have speculated on the factors that are essential in making people cry. Some of them have emphasized biochemical processes, others have focused on cognitive or communicative aspects (see, e.g., Kottler, 1996). Here, the primary interest is in what theorists say on the general nature of the internal and external factors that induce crying.

Psychoanalysts have developed an overflow theory of crying in which crying is seen as a kind of hydraulic/ overflow process, that is, as a safety valve (e.g., Breuer & Freud, 1895/1955; Koestler, 1964; Sadoff, 1966). Tears are thought to represent the

overflow of emotions that have passed a certain critical level. In this way, an excessive build-up of emotions is avoided. There occurs a draining off of energy that has been mobilized during the period of distress. This perspective might have fueled the common logic that crying in some sense is good for one's health (cf. Cornelius, 1981). Thus, a crucial aspect in this conception is the *high intensity* of emotions.

Crile (1915) argued that crying results when we develop tension anticipating some physical action which we then do not carry out. Crying is then considered as helpful in the release of built up nervous energy, resulting in a quick return to our normal state. In a similar vein, Bindra (1972) postulates that tears reflect the emotions and feelings that cannot be worked off in action, but can be consummated only in biological processes which result in an overflow of tears. In this view, tears help to discharge tension in situations in which an individual is unable to cope effectively. Frijda (1986) agrees with philosophers like Thomas Hobbes (1658) and Helmuth Plessner (1970) that crying occurs in situations in which people feel overwhelmed and experience a loss of control. So, crying is conceived of as a sign of helplessness and powerlessness.

Alternatively, the two-factor theory of Efran and Spangler (1979) poses that crying is the result of a *reappraisal of the factors* that induce arousal, which leads to a resolution of an emotional conflict. Arousal is assumed to be the consequence of an attempt to assimilate events that are incongruent with or interrupt schema-based expectations. Recovery is facilitated when a psychologically relevant event leads to the *giving up of the original schema*, thus making further assimilation efforts unnecessary. This theory is cognitive by nature because the induction of arousal and the recovery is defined in cognitive terms. Tears are considered to be a sign of tension release. They indicate the shift from arousal to recovery. At the moment that the individual feels that the worst is over, crying is assumed to be associated with increased parasympathetic activation after having been associated with increased sympathetic arousal in an earlier phase.

Labott and Martin (1988) have argued that both the two-factor theory and the overflow theory have serious limitations, in particular because both fail to predict when other responses, such as laughing, will occur. Therefore, they have proposed a combination of these two theories, stating that *incongruity* and *schema-change associated with high arousal*, caused by some specific emotions, most adequately predict emotional tears.

With respect to situations, the overflow model implies that in fact any episode can elicit crying. The particular context that actually elicits crying is like the drop that causes the bucket's running over. Also the Efran and Spangler model (1979) and the extended framework proposed by Labott and Martin (1988) do not refer to a specific group of situations or a particular type of environment.

Authors like Kottler (1996) have emphasized the communicative aspects of crying. Here, crying is considered to help in facilitating attachment and strengthening the mutual bonds between people. Stated otherwise, crying may induce sympathy, empathy, and comfort. In this view, adults cry for similar reasons as babies and young children, namely to signal distress and consequently to induce a helping response from others. It has been suggested by Kottler that man is the only animal species that cries because they are helpless and dependent on parents and/or caretakers for a relatively long time after birth. This dependence explains the need for a powerful and effective behavior pattern to induce help from others. Thus, one can speculate that crying occurs in particular in situations in which individuals feel alone and in which it is important for them to receive emotional support and sympathy. It may be useful to mobilize help from others in emergency situations (e.g., Kottler, 1996; Roes, 1990), to inhibit aggressive impulses of potential aggressors (Roes, 1990), or to induce sympathy, pity, and comfort from others (Mélinand, 1902; Borquist,

1906; Cornelius, 1981, 1997). This suggests that crying is under some control of the will. Indeed, crying can be used more or less consciously as a tactical manoeuvre (cf. Buss, 1992), similar to, for example, pain behavior which is also subject to operant conditioning processes.

According to Murube et al. (1999), emotional tearing is a facial manifestation of communication. Originally, the tears served as a symbol for suffering, with the intention to request help in order to overcome the problem (pain, loneliness, fear, etc.). Later in the phylogenetic development, emotional tears (without the auditive accompaniments) also became associated with offering help, when feeling sympathy, admiration, or helpfulness. The authors emphasize that their distinction does not overlap with the simple negative emotion – positive emotion classification. Although requesting help always results from negative feelings, offering help may be accompanied by positive or negative emotions. For example, crying when expressing condolence and when witnessing an athlete winning an important game are both considered as examples of offering help tears. Although, some theories, like the one put forth by Murube et al. (1999), might be partly applicable to joyful situations, like weddings, reunions, the happy end of a movie or passing an exam, most theories of crying strongly emphasize negative or distressing situations as causes of crying. As a consequence, the relevance of current models of coping is rather limited with respect to coping associated with positive events and experiences. In any case, it does not produce a clear picture. For example, applying the psychoanalytical overflow theory to crying at a wedding results in the hypothesis that the happy emotions during a wedding might be so overwhelming that they build up and reach a certain critical level just like sad or distressing events would do. Tears might function as an overflow process to drain off energy in both cases. However, psychoanalysts (see Wood & Wood, 1984) have also suggested that happy events might induce crying because of memories of unhappy experiences or unfulfilled wishes. A third view, explaining that crying occurs when the behavioral expression of positive emotions is considered as less appropriate in the given situation, is more conceptually linked to helplessness and inability to work out emotions behaviorally. For example, one can think of the winner of a gold medal at the Olympic Games, who thinking of the efforts, hardships and tough times during the training, has to stand still on the rostrum to listen respectfully to the national anthem with no opportunity for expressing emotions.

To summarize, it is clear that there is a wide variety of opinions on the background of crying. Some interpretations are basically untestable, but other perspectives may stimulate research which may yield answers to some basic questions in this area. Unfortunately, until now, most theories have not been tested empirically and research has generally not been theory-driven. Thus, it is hard to judge the value of these theories in explaining why and in what situations people cry. Therefore, in the following part of the chapter the focus will be on empirical data. Several mainly explorative and descriptive studies have been directed at the antecedents of crying spells, especially their situational and emotional context. The results of these studies will be discussed next.

Research on the causes of crying

Only in pathological conditions linked to neurological processes (see Chapter 15, this volume), do clear triggers inducing crying seem to be absent. In normal conditions, crying can be elicited by external (situations, events) or internal (thoughts, memories) stimuli. In the literature, several different approaches for studying the question *why* people cry can be identified. For instance, the focus of attention can be on emotions and feelings eliciting

crying, or on social episodes and other external situations. However, the precise status of emotions and feelings is not clear. Should they be considered as the real triggers of crying or just as mediators? Or perhaps even as the consequence of crying? Should one focus on the external events or internal stimuli that evoke those feelings and emotions? Or is it important to find out why sadness is often associated with crying, while in a substantial number of other cases this emotional state does not evoke tears? We will start our efforts to address these critical problems by providing a chronological summary of the results of studies focusing on the emotions and antecedent situations which are associated with crying. We consider this as an important first step to come to a better understanding and a more parsimonious explanation of crying in adults.

Situational and emotional antecedents of crying

Without going into details about the specific causes, Darwin (1872/1965) has written about crying associated with both positive and negative moods. For example, he speaks of reading a pathetic story, but also of suffering of bodily pain and mental distress. Borgquist (1906) is probably the first investigator who studied aspects of crying more systematically using questionnaire data as well as information from ethnologists and missionaries taking into account cultural background. He concluded that crying for grief, anger and joy was frequently mentioned in historical and legendary accounts in many cultures. Based on a thorough analysis of the introspective descriptions of the crying state, Borgquist identified three types of crying situations: (i) grief or sadness, (ii) anger, and (iii) joy. However, he also pointed to sympathy and fear as important accompanying feelings. In addition, he mentioned physical conditions like nervousness, fatigue, and pain. It was concluded that crying occurs predominantly in conditions containing elements of sadness, helplessness, or hopelessness. According to Borgquist, the crying response is “the physical accompaniment of a mental state which is a recognition of an inability to remove certain painful or oppressive conditions; the cry appears when the feeling has reached a certain intensity” (p. 165).

Lund (1930) based his report on observations at funerals, weddings, theatrical and musical performances, and other events in which the expression of emotions normally occurs. In addition, he asked psychology students to describe in detail cases of crying observed during the past trimester. These observations led to the following labeling of crying causes: (i) laughter; (ii) relief from tension; (iii) loss; (iv) joy; (v) sympathy and self-pity; (vi) dramatic events; and, finally, (vii) aesthetic experiences.

Young (1937) collected more than 1000 reports of crying and laughing episodes in a large sample of college students. He classified the reasons for crying as follows: (i) disappointment or discouragement, (ii) lowered self-esteem and a sense of personal inadequacy, (iii) unhappy mood, (iv) organic state, (v) special events, and (vi) laughter to the point of tears. This investigation further emphasized that whereas some of the conditions were organic in nature (e.g., fatigue, nervousness, headaches, illness, bodily injuries), the environmental causes of crying were almost uniquely social. In particular, actions, words, or attitudes of others were identified as the most important triggers.

Koestler (1964) listed the following situations which may cause crying: (i) raptness, (ii) mourning, (iii) relief, (iv) sympathy, and (v) self-pity. He further addressed crying in pain and when hungry, both in particular pertaining to babies and children. It is not clear upon what kind of data he based this classification.

Löfgren (1966) also did not indicate on which kind of data he based his conclusions. He proposed the following classification: (i) frustrating encounters with persons or things;

(ii) bodily injury and pain; (iii) object loss; (iv) shame and humiliation; (v) pity (and self-pity); (vi) 'Just moods', 'happy endings', weddings, joy, rage, etc; (vii) danger of various kinds, accompanied by a subjective experience of fear; and (viii) 'pathological weeping'.

Based on student data, Bindra (1972) derived information on the instigating situations as well as initial emotional states. Concerning the latter, he made the following distinction: (i) elation - typically associated with situations like reunion, reciprocation of love, or music, (ii) dejection - often linked with separation and/or loss, and (iii) anguish - frequently associated with conflict, humiliation, or failure. In addition, he noted that in the majority of the cases the triggering situation was one in which the participant had actively initiated the event that induced the emotional state, whereas in approximately 20% of the cases the reporter was actually not participating, but an observer, reader, or listener. Furthermore, it was found that the majority of the situations were concrete and real (e.g., novel, film, song) and only 10 were imagined situations including recall or extrapolations of past experiences.

Another investigation using recent actual crying episodes is the 1-month diary study by Frey et al (1983). These investigators applied a rather global classification of crying inducing events and observed that 40% of the events were associated with interpersonal issues, 32% with media matters (books, movies, TV), and 7% with sad thoughts. Later on, Frey (1985) specified the interpersonal situations into two broad categories: positive (e.g., reunion, weddings) and negative situations (e.g., conflicts), without providing information concerning their relative importance.

More recently, Kottler (1996) presented the following taxonomy: (i) physiological response (to irritants, but also to exhaustion or even orgasm); (ii) reminiscence; (iii) redemption and release; (iv) 'in connection to others'; (v) grief and loss; (vi) despair and depression; (vii) joyful and aesthetic transcendence; (viii) vicarious experience; (ix) anger and frustration; and (x) manipulative tears.

Williams and Morris (1996) observed gender differences in their sample of English and Israeli university students and faculty members. Women cried more often in conflict situations and in situations inducing anger. In contrast, men rarely cried for these reasons. For men, tender situations stimulated tears more easily. Recent research in Malaysia (Joseph, 1996) yielded rather similar findings.

Wagner et al. (1997) investigated crying behavior and attitudes towards crying in medical doctors, nurses, and medical students, applying self-report questionnaires. Their results showed that the main reasons for crying were identification and bonding with suffering and dying patients and their families. Other relatively frequently mentioned causes were humiliation, being criticized or in other ways not treated well by supervisors, frustration, and being overtired or overworked and exhausted.

Vingerhoets et al. (1997), examining a sample of 250 persons, mainly women, came to the following conclusions. Adults cry in response to discrete emotional events, but also without any clear external trigger when reflecting on their lives or situations. Stimuli that are essentially weak and neutral may evoke strong memories to traumatic or very emotional events, in that way resulting in crying. Second, the inducing situations are often conflicts, feelings of personal inadequacy, and/or loss events. In this study, the authors came across several problems regarding the identification and classification of the various triggers of crying. A first problem concerned the difficulty in distinguishing between objective situations and closely related feelings and emotions. For example, people described as a major inducing situation that they *felt* lonesome, rejected, homesick, or humiliated. A second problem was that people appear to be able to suppress crying and suspend it to a later and more appropriate moment, for instance, after having isolated oneself from a group

or an opponent in a conflict situation. Or people first start crying when laying in bed reflecting on what has happened at work or in response to a message that they received earlier that day. Since books, films and TV-reports or official memorial ceremonies may induce memories of tragic events in some, but not in others, it is difficult to obtain a good understanding of what actually makes people cry in such situations.

Vingerhoets and Becht (1997), within the context of the International Study on Adult Crying (ISAC), found a substantial agreement in crying inducing situations in males and females. Conflicts, loss experiences, and witnessing suffering were reported most often by all participants. In addition, as already reported by William and Morris (1996), men appeared to let their tears flow more easily when experiencing positive events as compared to women.

Unterberg (1998) asked adolescents (11 - 16 years) to report their most recent crying episode. Interestingly, her results indicated that girls cry frequently for empathic reasons, whereas boys mentioned this rather seldom. In addition, it appeared that boys cry more often because of physical pain than girls. The interpretation of these findings requires caution. For example, we do not know to what extent boys and girls actually differ in terms of number of pain experiences. One might speculate, for instance, that these differences are mainly due to a differential pattern of participation in competitive sports and game activities that for boys are generally somewhat rougher than for girls.

Finally, Damen (1999) conducted a semi-structured interview among 20 students, collecting information about the antecedents of being touched to tears. In a second study, 103 students completed a 33-item questionnaire, developed on the basis of the results of the interviews. The interviews revealed that people become often tearful by the beauty of nature, music, film, others they love, or by persons doing something special. Factor analysis yielded the following three factors: (i) aesthetics related items (e.g., beautiful art, nature, poems, songs, etc.); (ii) film and sentimental issue related items (e.g., puppy dogs, etc.); and (iii) social event related items (e.g., weddings, reunions, making love, etc).

Whereas until now the focus was mainly on crying eliciting situations, Vingerhoets et al. (1997) and Vingerhoets and Becht (1997) additionally assessed accompanying emotions. It appeared that often there is a blend of emotional feelings. Only exceptionally, respondents report just one emotion. Sadness, powerlessness, anger, anxiety, and frustration prevail. Not seldom there is the combination with powerlessness. One experiences anger and powerlessness or sadness and powerlessness. Therefore, in spite of the rich data that have been reported, it is not easy to summarize the most important situational and emotional antecedents of crying identified in empirical research and to draw any firm conclusions. On the other hand, helplessness and powerlessness are recurrent themes at least since Thomas Hobbes (1658).

Problems in current crying research

It is still largely unknown why people experiencing the same emotions differ with respect to crying. Is this just a matter of intensity or do other factors play a substantial role? Results vary to a large degree and authors seldom differentiate between emotions and crying inducing situations. In addition, all authors use their own categorization systems which prevents the possibility of a more systematic comparison of the empirical data. One can only say that recurring themes are grief/loss, interpersonal conflicts, anger/frustration, joyful experiences, and powerlessness.

Another major problem is that many investigators fail to recognize the difference between, on the one hand, *crying proneness* or *crying propensity* and, on the other hand,

actual crying behavior. This distinction is important because there are substantial differences between the answers to questions regarding the type of situations that most likely elicit tears and the kinds of situations in which people *most often* cry. The discrepancy between these two questions may be best illustrated by referring to the death of loved ones, which ranks very high among the situations that will make people cry. However, fortunately, this is such a rare event that it does not often show up in the answers to requests to describe the situation that has made one cry most recently. In other words, people cry most often for reasons that do not rank very high among the situations that are very likely to trigger the crying response. And vice versa, people generally do not cry often for those events that are rated as very likely making them cry. Only some exceptional situations rank relatively high on both lists. For male students, the loss of intimate relationships is such an item. In the ISAC study (Vingerhoets & Becht, 1997), this item was rated among the most potential situation inducing tears and as the most frequently reported actual trigger. For female students, watching sad movies is important in both respects. Thus, a different picture emerges when subjects are requested to report on the crying inducing potential of situations (e.g., the death of a loved one, broken relationships, weddings, etc.) versus when asked to provide information about their last actual crying episode. In the latter case conflicts, being rejected, and personal inadequacy appear to be more important. Remarkably, physical pain is hardly ever mentioned.

Whereas measurements of actual crying frequency rely on the recall of recent episodes, crying proneness is usually measured by describing hypothetical situations to respondents and to ask them to indicate how likely it is that they will shed tears in these particular situations. Examples are the Crying "Frequency" Scale (CFS; cf. Kraemer & Hastrup, 1986), a 20-item checklist, covering "a wide variety of emotions and events", developed by Lombardo et al. (1983), the Weeping "Frequency" Scale (Labott & Martin, 1987), the Crying Questionnaire (Williams, 1982), and a 30-item list constructed by Williams and Morris (1996). Studies using these scales show a strong correspondence in findings: the death of intimates, broken love relationships, and sad movies or television programs rank highest. Among the positive situations, weddings, music and reunions occupy top positions. Probably the most extensive list is the one developed by Vingerhoets (1996; see also appendix) within the context of the ISAC-project, which contains a total of 55 negative and positive situations and emotions that are more or less likely to elicit tears in several cultures. Situations included in this list that rank highest for their crying inducing potential were 'tragic' events, funerals, loss of relationship, sad movies and television programs, and the state of despair.

In a recent laboratory study, we adopted an alternative approach in order to learn more about the type of situations that are likely to evoke crying. One-hundred female students volunteered watching the dramatic movie "Once Were Warriors" (Tamahori, 1995). This movie depicts the family life of a dysfunctional Maori family in New Zealand. The father has lost his job and spends most of the time drinking with his friends. He mistreats his wife and does not pay any attention to his children. After the film, participants were asked to report the scenes during which they had cried (ranging from just wet eyes to full sobbing). The results indicate that the most potent crying inducing event was the scene where the mother finds her daughter who committed suicide (approximately one-third of the subjects reported shedding tears). Subjects also rated the scenes of the daughter's funeral, a rape scene, and the assault and battery of the mother as highly emotional. A major advantage of this methodology is that it allows for an accurate comparison of actual crying behavior in different groups (men vs. women, young vs. old, different personality types, etc.) or under different circumstances (e.g., alone vs. accompanied by friends or

strangers, at different times during the day, during different phases of the menstrual cycle, etc.). We feel that such an approach may be very helpful to learn more about inhibiting and facilitating factors of the crying response, since it gives the researcher at least some control and possibilities for manipulation.

In conclusion, a number of authors have more or less systematically collected data on situations and emotions that induce crying. In addition to problems in making adequate categorizations of the qualitatively different conceptualizations of situations, we feel that another serious problem is due to the fact that emotions are seldom experienced in a pure form. Very often it is a rather complex blend of feelings with helplessness or powerlessness as crucial elements that elicit the crying response. This is not to say that it is easy to come to an adequate classification of the experiences that trigger the crying response. Vingerhoets et al. (1997) made clear that there is a whole complex of factors that determine whether or not tears will be shed (see Figure 1).

Insert Figure 1 about here

More precisely, in addition to the exposure to potentially crying inducing situations and a specific appraisal of those situations, there are moderating factors that play a major role as determinants whether or not crying will be inhibited or facilitated. Within these moderators, a differentiation can be made between person factors (both physical and psychological state and trait variables), social factors (e.g. the absence or presence of (specific) others), and cultural factors (in particular the so-called cultural “display rules”). Being exposed to an emotional situation or a strong emotional memory is, although necessary, not a sufficient condition to evoke crying. For a more accurate prediction whether crying will occur, additional information is needed concerning the moderating variables.

Even if the situation seems at first sight favorable for crying, a crying response may not necessarily occur. As already indicated, Vingerhoets et al. (1997) found that people may delay their crying reaction until a later, more appropriate moment. It is not entirely clear why people do this, since this issue has not been dealt with specifically in systematic research. Vingerhoets et al. suggested the following explanations for postponing crying: waiting until a specific person is absent or present, exposure to cues that reactivate memories, or in a discussion resulting in a reappraisal of the situation. In the ISAC study (Vingerhoets & Becht, 1997), participants were asked to estimate the time interval between the actual event and the crying response. It appeared that in nearly 75% of the cases the response is rather direct, i.e., the interval is less than 15 minutes. In about 10% of the cases, the crying eliciting event happened more than one day ago. This once more illustrates that, whether or not a person will cry in a certain situation not only depends on the exposure to an emotional situation, but also on moderating factors that make a crying response more or less likely to occur. Below we will summarize recent data that further enhance our understanding of the ‘*where and when*’ of crying.

The situational context of crying

Concerning the timing of crying, Frey (1985) reported a dramatic increase in female crying frequency between 7 P.M. and 10 P.M., whereas no significant variations were detected between 9 A.M. and 7 P.M. Vingerhoets et al. (1997) and Becht and Vingerhoets (1997) substantiated these findings and demonstrated further that the propensity to cry shows a gradual increase between 4.00 AM and 11.00 PM (see Figure 2). Van Tilburg and Vingerhoets (2000) found a similar pattern when collecting diary data on mood and crying

during two full menstrual cycles among 82 female students.

Insert Figure 2 about here

There are several potential reasons why crying occurs predominantly in the evening. First, there is an increased opportunity for conflicts due to the fact that this is the time when partners and children are together. Second, it is also the time to watch television, which is a powerful stimulus for (especially female) tears. Third, one may feel tired after a full day of working, which may lower the crying threshold. Fourth, feeling safe, alone or only with intimates, might affect the proneness to cry. A final theoretical explanation is that crying also shows a circadian rhythm, just like many other behaviors and physiological and psychological processes. Indeed, there appears to be some correspondence in findings obtained in babies and newborns and the present adult data (e.g. St. James-Roberts et al., 1994).

Research has further yielded evidence that the likelihood that someone will cry is also dependent on the presence of others in the situation. Vingerhoets et al. (1997) and Becht and Vingerhoets (1997) established that in the majority of the cases (75 %), people cry at home, with no one (37 %) or just one person (29 %) present. The effects of the presence of others on crying are summarized by Cornelius and Labott (Chapter 9, this volume). Generally, it has been found that people report a greater likelihood of crying when alone than when with others. It is often feared that crying may be perceived as a sign of self-indulgence or weakness and, as such, crying is an act that should be controlled or inhibited. For example, Truijers (1999) found that in particular among adolescent males crying was among the most important acts that induced shame. In addition, people may attempt to control crying because they do not want to upset others or make other people lose control (Littlewood, 1992). For example, parents may not want that their small children see them crying, because it may cause severe distress in them.

The opposite situation, when one cries when in company of others, should not be ignored. In some occasions people may cry just because others are present. For example, people can use tears to signal or to manipulate others (e.g., Buss, 1992; Lackie, 1977). We probably all know from our own experience that children having hurt themselves often do not start crying until they see one of their parents. Lackie (1977) further gives an interesting description of a widow of an alcoholic and one of her daughters who, according to the author, used crying to control others. Furthermore, crying can be contagious. Seeing other people cry may make the beholder cry too, as may happen during funerals or other public situations, like memorial meetings, etc. It has been found that in particular women are sensitive to this form of emotional contagion (Doherty et al., 1995; Hatfield et al., 1994).

To summarize, the presence of others may either inhibit or stimulate crying, dependent on the relationship with them, their display of emotion, etc. Progress in understanding the effects of a social context on crying may be hindered by a lack of consensus on whether or not crying must be considered as a communicative display (cf. Cornelius, 1997; Fridlund, 1994). There is evidence that adult crying has a communicative function, similar to infant crying which attracts attention, help, solace and instrumental support from nearby persons. However, adults can use many other verbal and nonverbal behaviors to communicate feelings of distress. Moreover, as shown above, empirical data indicate that adults often cry when alone. Why would people display behavior with an essentially communicative function, when alone? According to Fridlund (1994), private displays of emotions might be considered social because we may treat ourselves as an audience or as another interacting subject, we may act as if others were present or imagine

they are, we may forecast or rehearse interactions with others, and we may treat animals or inanimate objects as participants in the interaction. Following this reasoning, crying alone means that the communicative function is maintained, while the negative reactions of the social environment and of the individual him/herself (shame) are, at the same time, avoided.

Vingerhoets et al. (1997) and Vingerhoets and Becht (1997) focused on some additional aspects of the crying inducing situation. In terms of the responsibility for the situation, it was found that most frequently persons see themselves as responsible, but often also the partner, family or relatives are “blamed”. Furthermore, relatively frequently, the events and the crying response were anticipated. In only 11% of the cases the tears did come as a complete surprise. In addition, most respondents felt powerless and unable to cope with the situation and in the majority of cases one did not try to hide their tears. These findings seem to indicate that crying implies an inability to cope in any other way with the situation.

Summary and conclusion

When studying the context of crying, one should be aware of the fact that all the studies discussed so far have been conducted in (modern) Western cultures, more specifically, the United States and Northern European countries. Therefore, it is not clear to what extent one may generalize the findings presented here to other cultures (see Chapter 8, this volume). As one example of the strong cultural influences on crying, we would like to refer to the work by Wellenkamp (1988, 1992), on crying and its meaning in the Toraja tribe in Indonesia. According to the traditional beliefs of the Toraja, it is taboo for adults to cry (audibly), except in two very well described situations: (i) after a death and during the funeral or a secondary burial which is a kind of ritual, and (ii) when women are unable to become pregnant. In the latter case, women who are unable to conceive a child are expected to cry with other women at a rock said to be inhabited by a spirit as a kind of remedy for infertility. The prohibition on crying is as important as the ban on adultery and cursing someone. This is not to say that crying does not occur in a wide variety of situations like marital quarrels or departures. However, in those cases one has to make a sacrificial offering to atone for violating the prohibition. In addition, Lutz (1999), who vividly describes crying in a historic perspective, makes clear how crying in former times was related to religious experiences and heroism. These examples clearly illustrate the importance of social and cultural rules and norms when investigating the context of crying. In addition to personal and sociodemographic factors, culture also may be expected to influence emotion regulation, resulting in either increased or decreased emotional expression accompanied by tears.

It appears that people report most likely shedding tears in uncommon situations like the death of intimates, broken love relationships, weddings, etc. In contrast, conflicts, being rejected, and the experience of personal inadequacy appear to be important in eliciting actual crying episodes. Grief, sadness, joy, anger, frustration, self-pity, helplessness and powerlessness are the most frequently reported emotions associated with adult crying. It is not clear yet whether these feelings are part of the appraisal processes that cause crying behavior, or are simply feelings that accompany the shedding of tears. As for the temporal context, the tendency to cry increases during the day and peaks in the evening. Furthermore, crying can be postponed if the situation does not allow one to cry at the moment itself.

Little is known about the social context of crying, in spite of the obvious power of

others to influence emotional experience and expression. So, it is not clear how crying is shaped by the social context, especially by the reactions of others. However, data suggest that the presence of others may either stimulate or inhibit crying. It has been shown that gender plays a role, although the influence of gender on crying may be changing somewhat over time. In addition, cultural factors play a crucial role. What is clear from this chapter is the important distinction between potential triggers, on the one hand, and moderating variables, on the other hand. We are convinced that this model may help to design future studies to examine the complex interplay of the different relevant factors to crying behavior. Experiencing an emotion is one thing, but expressing that emotion via tears is quite a different thing, with its own rules and under the influence of other factors. We are just beginning to understand the different influences that these two different processes undergo, but we hope to have given an important impetus with the present chapter.

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Figure captions

Figure 1.

Preliminary model of adult crying, focusing on the antecedents and moderating factors.

Figure 2.

Crying by time of the day.