



Rumination and suicidal ideation: The moderating roles of hope and optimism

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ABSTRACT

The current study aimed to investigate whether the correlation between rumination and suicidal ideation is moderated by the presence of hope and optimism. It was hypothesized that both hope and optimism would moderate (weaken) the relationship between rumination and suicidal ideation. Two hundred and ninety-eight participants completed self-report measures of hope, optimism, rumination (brooding and reflection), and depression. Results demonstrated that both hope and optimism weakened the relationship between rumination and suicidal ideation, as well as the relationships between both subscales of rumination and suicidal thinking. These results were found when controlling for symptoms of depression. Results suggest that a ruminative thinking style may be most harmful when an absence of hope or optimism is also present.

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1. Introduction

Statistics regarding causes of death in the United States indicate that suicide is the tenth leading cause of death in the country (McIntosh & Drapeau, 2012). To assist in the prevention of suicide, researchers have identified risk factors for suicidal behaviors, with hopelessness, suicidal ideation, and rumination emerging as some of the strongest predictors of suicide risk (McLean, Maxwell, Platt, Harris, & Jepson, 2008). The current study aimed to further explore the relationship between rumination, an empirically supported cognitive risk factor for suicide, and suicidal ideation.

Rumination is defined as repetitive thoughts regarding one's current distress, including the reasons for and the consequences of this distress (Nolen-Hoeksema, 1991). Rumination has been found to result in depressive symptoms, impaired motivation and concentration, and reduced problem solving ability (Papageorgiou & Wells, 2004; Watkins, Moulds, & Mackintosh, 2005). Furthermore, rumination is experienced as intrusive, disruptive, and time consuming (Papageorgiou & Wells, 2004). For these reasons, rumination has been conceptualized as a maladaptive coping strategy.

Rumination consists of two components, (1) brooding and (2) reflection. Brooding is repetitively dwelling on negative consequences of distress, whereas reflection involves actively seeking information in order to help better understand one's distress. Treynor, Gonzalez, and Nolen-Hoeksema (2003) found that reflective rumination led to a decrease in depressive symptoms whereas brooding rumination led to increased depressive symptoms. At least one other study (Gooding, Taylor, & Tarrrier, 2012) has found that *both* subscales predicted negative outcomes, although brooding was more strongly related to depressed mood. Reflection only predicted depressed mood for participants who believed reflection was an ineffective coping strategy. With inconsistencies in the literature regarding the perniciousness of these subscales, more research is needed to investigate rumination, brooding, and reflection.

The relationship between rumination, its subscales, and suicidal ideation has been explicitly studied over the last decade. Morrison and O'Connor (2008) reviewed the existing studies and concluded that the larger construct of rumination was positively related to suicidal desire and/or attempts in 10 of the 11 reviewed studies. Interestingly though, the findings were not as consistent for the specific styles of brooding and reflection. Several studies noted that brooding was associated with suicidal ideation (Miranda & Nolen-Hoeksema, 2007; O'Connor & Noyce, 2008; O'Connor,

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O'Connor, & Marshall, 2007) or attempts (Crane, Barnhofer, & Williams, 2007). However, reflection was either associated with being a non-attempter (Crane et al., 2007) or not associated with suicide at all (O'Connor & Noyce, 2008). More recent research has suggested that psychiatric inpatients with a history of suicide attempts engaged in brooding rumination more often than inpatients with no history of attempts, but no difference was found for reflective rumination (Grassia & Gibb, 2009). This suicide literature both contributes to the work on rumination and depression, and demonstrates the importance of examining both rumination styles in addition to the larger construct.

Despite consistent findings correlating rumination and suicidal behaviors, fewer studies have attempted to explain potential moderators of this association. One potential moderator of this relationship is that of hope. Nolen-Hoeksema (1991) argues that rumination prevents individuals from actively attempting to make changes to ease their distress. Hope Theory posits that hope is composed of three elements – goals, pathways, and agency (Snyder, Rand, & Sigmon, 2005). Thus, all human behavior is guided by goals. To attain their goals, humans must engage in pathways thinking, which allows individuals to determine avenues towards obtaining their goals. Lastly, agency is a component of hope that fosters motivation and perceived capability to reach and achieve goals (Snyder et al., 2005). It may be that rumination is most strongly related to suicide if there is also an absence in hope. Hope has been shown to moderate the relationship between rumination and depression (Geiger & Kwon, 2010) but has not been investigated in relationship to the link between rumination and suicide. In their study of depression, Geiger and Kwon (2010) suggest that when ruminating, hopeful individuals can overcome both the event that preceded the rumination as well as the repetitive thinking because they feel as though they can enact plans to work through the issues that are occupying their thoughts. Thus, hopeful individuals are buffered against the effect that rumination has on levels of depression.

Optimism may be another potential moderator between rumination and suicide, but it has not been explicitly studied. The definition of optimism revolves around the notion of future expectations. Individuals who are considered optimists tend to think of the future in a positive manner and believe that life will be generally favorable (Carver & Scheier, 2005). Furthermore, optimists and pessimists differ in their coping strategies when faced with difficult life situations. When optimists encounter difficulties, they use problem-solving coping (Carver & Scheier, 2005) whereas research demonstrates that those with a pessimistic outlook may engage in self-defeating acts, including suicidal behavior (see Carver & Scheier, 2005 for a review). Although optimism and hope involve thinking about, and expectations for future events, Bryant and Cvengros (2004) argue that these two positive psychological variables are distinct, moderately intercorrelated constructs. In their investigation, a higher-order Confirmatory Factor Analysis (CFA) indicated that hope and optimism analyzed separately (i.e., as two distinct factors) provided better structural fit than the two constructs analyzed together as one factor. The researchers argued that hope may encompass personal striving for specific goals, whereas the construct of optimism refers to the general expectation that future outcomes will be positive.

To date, there is a larger knowledge base of risk factors for suicide than protective factors and resiliency against suicide (Linehan, Goodstein, Nielsen, & Chiles, 1983; Wingate et al., 2006). Investigating suicide through personal and community strengths is a novel yet imperative method to reduce the prevalence of suicide (Wingate et al., 2006). Previous research has demonstrated that hope is not only a robust protective factor against suicide, but is also protective against risk factors for suicide such as hopelessness, suicidal ideation, thwarted belongingness, and perceived burden-

someness (Davidson, Wingate, Rasmussen, & Sligh, 2009; Grewal & Porter, 2007; Range & Penton, 1994). The protective relationship of hope against suicidal thinking, thwarted belongingness, and perceived burdensomeness has been extended to ethnic minority populations such as African Americans and American Indian/Alaskan Natives (Davidson, Wingate, Sligh, & Rasmussen, 2010; Meadows, Kaslow, Thompson, & Jurkovic, 2005; O'Keefe, Tucker, Wingate, & Rasmussen, 2011).

Similarly, the theoretical relationship between optimism/pessimism and suicide has been empirically supported. Individuals with no previous suicidal behavior rated life more positively than individuals with suicidal ideation or recent suicide attempts (Wetzel, 1975). Previous research has also demonstrated a negative relationship between optimism and hopelessness (O'Connor & Cassidy, 2007), suicidal ideation (Hirsch, Conner, & Duberstein, 2007), thwarted belongingness, and perceived burdensomeness (Rasmussen & Wingate, 2011).

Although the rumination literature and positive psychology literature have both successfully linked their respective constructs to suicide, these literatures have remained independent from each other. However, examining the relationship between rumination – a robust predictor of suicide – and positive psychological traits may help elucidate specific moderators of the relationship between the maladaptive coping strategy and the desire for suicide. It is possible that those who ruminate, but are more hopeful or optimistic by nature, may feel less of the effects of the repetitive thinking and thus experience less thoughts of suicide. Even when ruminating, individuals who are naturally more hopeful or optimistic may be buffered against the effects of rumination and thus experience less suicidal ideation. Clarifying these relationships could provide important information about the maintenance of suicidal thinking as well as possible ways to foster resilience in clients. Competent treatment for individuals experiencing suicidal thinking may not only focus on the reduction of ruminative tendencies, but also incorporate cognitive-behavioral strategies aimed at fostering hope and/or optimism in clients.

The current study aimed to investigate the relationship between hope, optimism, suicidal ideation, and rumination. It was hypothesized that hope and optimism would be associated with lower levels of rumination, brooding, and reflection, thus demonstrating a protective relationship. This study also tested whether hope and/or optimism moderates the relationship between rumination and suicidal ideation. It was hypothesized that hope would buffer the effect that rumination has on thoughts of suicide. Thus, elevated levels of rumination would be related to increased suicidal ideation *only* in the presence of low levels of hope. We expected to see this pattern with optimism as well, namely optimism would buffer the relationship between rumination and suicidal ideation.

2. Materials and methods

2.1. Participants and procedure

Undergraduate students at a large Midwestern university earned course credit for their participation in the current study. Participants were recruited through the university's SONA system. This system allows participants to sign up to participate in available research studies. Participants completed study measures via an online research questionnaire and were provided course credit for participation. All study procedures were approved by the university's institutional review board. The sample consisted of 298 participants, 69.1% of which were female (206) and 30.9% were male (92). Participant age ranged from 18 to 56 years with a mean age of 19.61. Two-hundred and forty participants identified as

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