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Autonomy (vs. sociotropy) and depressive symptoms in quitting smoking: Evidence for trait-congruence and the role of gender

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Abstract

According to Beck's cognitive theory of depression, autonomy (high achievement concerns) and sociotropy (high interpersonal concerns) are vulnerability factors for depression when achievement or interpersonal stressors, respectively, are experienced. This hypothesis was tested among men and women attempting to quit smoking, an achievement stressor that can provoke depressive symptoms. Smokers recruited from the community (N=210) provided information about their quit attempt through mailed questionnaires. For the 48-h period following the quit, relationships among autonomy, sociotropy, coping, depressive symptoms and lapsing were assessed. Structural equation models supported the trait-congruence hypothesis because greater autonomy, but not sociotropy, was associated with elevated depressive symptoms among both men and women smokers. However, results were stronger for men ($\beta = .47$, p = .0001) than for women ($\beta = .20$, p = .05). After accounting for autonomy's relationship with depressive symptoms, greater autonomy was inversely associated with lapsing among men ($\beta = -.35$, p = .01), but not women. Results point to the potential usefulness of a theoretical approach to understanding relationships between depressive symptoms and smoking cessation, and indicate that autonomous personality may be an important factor in smoking cessation in men. \mathbb{O} 2005 Elsevier Ltd. All rights reserved.

Keywords: Autonomy; Coping; Depressive symptoms; Smoking; Sociotropy

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Encouraging smokers to quit is an important public health goal but is difficult for the majority of current smokers. Tobacco use claims at least 419,000 lives every year (Centers for Disease Control and Prevention, 2002) and is responsible for at least 29% of all cancer deaths in the U.S. (American Cancer Society, 2002). Most smokers regard quitting as a very difficult process, a perception consistent with the low abstinence rates of 3% to 5% among self-quitters (Hughes, Keely, & Naud, 2004). During early abstinence, smokers experience a variety of withdrawal symptoms that can include intense feelings of depression, irritability, insomnia, and other somatic and emotional states (Hughes, 1992a). Several investigations have focused on the occurrence of depressive symptoms during quitting. These studies have suggested that depression-prone smokers are more likely to experience depressive symptoms during abstinence (Ginsberg, Hall, Reus, & Munoz, 1995; Niaura et al., 1999), which makes quitting more difficult (Brandon, 1994; Kassel, Stroud, & Paronis, 2003). Studies also indicate that in North America depression or depressive symptoms are more common among women than men (Culbertson, 1997) but depressed affect does not appear to account for women's greater difficulty in quitting (Wetter et al., 1999). If there is indeed a relationship between depression-proneness and difficulty quitting it would be valuable to have a theoretical framework that could account for these findings. The present study uses trait constructs from Beck's cognitive theory of depression vulnerability (Beck, 1983, 1987) to examine the occurrence of depressive symptoms during quitting, and does so for women and men separately.

The present study is also relevant to research on personality in smoking behavior. Previous research has implicated personality variables such as hostility, sensation-seeking, impulsivity, and neuroticism in smoking cessation outcomes (Gilbert, Crauthers, Mooney, McClernon, & Jensen, 1999; Lipkus, Barefoot, Williams, & Siegler, 1994; Reuter & Netter, 2001), but findings have been inconsistent and not grounded in psychological theory. The present study uses a theoretical framework to investigate the relationship between personality vulnerability for depressive symptoms and ability to abstain soon after a quit attempt.

1. Cognitive vulnerability and the trait-congruence hypothesis

According to Beck's (1983, 1987) cognitive model of depression, two personality styles predispose individuals to depression, depending on the nature of stressors experienced. Referred to as the "trait-congruence" hypothesis, it posits that (i) individuals high in sociotropy have high needs for affiliation, acceptance, and support, and are vulnerable to *interpersonal* stressors, and (ii) autonomous individuals experience excessive concern and worry about personal achievement, maintaining independence and freedom, and are vulnerable to *achievement-related* stressors. Studies support the validity of a sociotropic personality style by demonstrating that sociotropic individuals experience dysphoric or physiological stress reactions in response to primarily interpersonal stressors (Allen, Horne, & Trinder, 1996; Bieling & Alden, 1998; Bruch, Rivet, Heimberg, Hunt, & McIntosh, 1999; Ewart, Jorgensen, & Kolodner, 1995). The evidence for an autonomous style, however, is mixed (Coyne & Whiffen, 1995; Segal, Shaw, & Vella, 1989). However, a recent investigation that used both a clinical sample of adult depressed patients, as well as matched controls from the community, found support for the congruence hypothesis for both sociotropy and autonomy (Mazure, Gruce, Maciejewski, & Jacobs, 2000). These findings suggested that previous use of undergraduate samples may have contributed to conflicting

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