



Anger Rumination, Internalizing and Externalizing Symptoms, and Emotion Dysregulation in Clinically Referred Children



Sherelle L. Harmon, Taylor N. Day, Nicole Ferretti, Elia F. Soto, Erica L. Wells, Janet A. Kistner, Michael J. Kofler
Florida State University

Introduction

- The frequent comorbidity of psychological disorders in children underscores the need to examine common factors underlying their etiology.
- Rumination, a response style characterized by repetitive and focused attention on one's negative symptoms (Nolen-Hoeksema, 1991), has been identified as a transdiagnostic risk factor.
- Existing literature show that sadness rumination (SR) increases risk for depression and anxiety (McLaughlin & Nolen-Hoeksema, 2011; Olatunji et al., 2013).
- Similar to SR, anger rumination (AR) is associated with increased risk of aggression (Rusting & Nolen-Hoeksema, 1998).
 - However, few studies have examined rumination to multiple emotions in a single study.
 - This limits our understanding of their unique and shared contribution to the development of psychopathology.
- Recent work examining SR and AR together found that only AR uniquely predicted internalizing and externalizing symptoms (Harmon et al., 2016), suggesting that AR, compared to SR, may better account for the development of psychopathology.
 - However, given that this study was conducted in a community sample of children, questions remain regarding the applicability of these findings to understanding child psychopathology.

Present Study

Examine the unique and shared behavioral correlates of AR and SR in a clinically referred sample of children.

The following hypotheses were tested:

- AR predicts depression, anxiety, and conduct problems.
- SR does not predict depression, anxiety, and conduct problems.

Methods

Participants

- N = 28
- Clinically referred
- 8-13 years old (mean age =10)
- 41% male

| Child Self-Report Measures | | Construct Assessed |
|--|--|--------------------|
| Children's Responses Styles Scale (CRSS) | | Sadness Rumination |
| Children's Anger Rumination Scale (CARS) | | Anger Rumination |
| Children's Depression Inventory-2 (CDI-2) | | Depression |
| Multidimensional Anxiety Scale for Children-2 (MASC-2) | | Anxiety |
| Parent -Report Measures | | |
| Emotion Regulation Checklist (ERC) Liability/Negativity Subscale | | Emotion Regulation |
| Behavior Assessment System for Children-2 (BASC-2) | | Conduct Problems |

Results

| | | Child Self-Report | | Parent-Report | |
|-------------------|---------------------------------------|-------------------|---------|------------------|--------------------|
| | | Depression | Anxiety | Conduct Problems | Emotion Regulation |
| Child Self-Report | Anger Rumination controlling for SR | .42* | .67** | .45* | .50* |
| | Sadness Rumination controlling for AR | .01 | -.11 | -.30 | -.16 |
| Parent-Report | Emotion Regulation | .41* | .41* | .39* | -- |

*p<.05, **p<.01, ***p<.001

Discussion

- Consistent with previous findings, these results demonstrate that AR uniquely predicted elevated symptoms of depression, anxiety, and conduct problems in clinically referred children.
- These findings also suggest that children's perseveration on emotional states of anger is related to parental perception of their child's emotion dysregulation.
 - This suggests that children's internal states are related to external manifestations that can be observed by parents.
 - Provides converging evidence of parent-child consistency in report of psychological symptoms.
- Collectively, these findings suggest that AR may play a role in both psychopathology and emotion dysregulation, and offer a potential target for intervening on a transdiagnostic mechanism.

References

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