Stoicism and sensation seeking: Male vulnerabilities for the acquired capability for suicide

Tracy K. Witte a,*, Kathryn H. Gordon b, Phillip N. Smith c, Kimberly A. Van Orden d

a Department of Psychology, 226 Thach Hall, Auburn University, AL 36849-5214, United States
b Department of Psychology, North Dakota State University, NDSU Dept. 276, P.O. Box 6050, Fargo, ND 58108, United States
c Department of Psychology, University of South Alabama, Life Sciences Building Room 320, Mobile, AL 3668-002, United States
d Department of Psychiatry, University of Rochester Medical Center, 300 Crittenden Blvd, Box Psych, Rochester, NY 14642, United States

A R T I C L E   I N F O

Article history:
Available online 23 March 2012

Keywords:
Suicide
Stoicism
Sensation seeking
Gender differences

A B S T R A C T

Our aim was to investigate two personality traits (i.e., stoicism and sensation seeking) that may account for well-established gender differences in suicide, within the framework of the interpersonal theory of suicide. This theory proposes that acquired capability for suicide, a construct comprised of pain insensitivity and fearlessness about death, explains gender differences in suicide. Across two samples of undergraduates (N = 185 and N = 363), men demonstrated significantly greater levels of both facets of acquired capability than women. Further, we found that stoicism accounted for the relationship between gender and pain insensitivity, and sensation seeking accounted for the relationship between gender and fearlessness about death. Thus, personality may be one psychological mechanism accounting for gender differences in suicidal behavior.

© 2012 Elsevier Inc. All rights reserved.

1. Introduction

In nearly every nation worldwide, men die by suicide more frequently than women (World Health Organization, 2011), and they represent approximately 80% of the people who die by suicide in the United States each year (National Center for Injury Prevention and Control, 2007). To date, much of the research investigating risk factors for suicide has focused on those that do not offer plausible explanations for gender differences in suicide mortality. For example, major depressive disorder is one of the most widely studied risk factors for suicidal behavior, yet it is substantially less likely to affect men than women (e.g., Nolen-Hoeksema, Grayson, & Larson, 1999). Further, many theoretical accounts of suicide (e.g., Beck, Brown, Berchick, Stewart, & Steer, 1990; Shneidman, 1998) propose identical causal processes for non-fatal and fatal suicidal behavior. This is problematic in that men are far less likely to engage in non-fatal suicidal behavior than women (Nock et al., 2008), which suggests that there may be different causal pathways for lethal versus non-lethal suicidal behavior. There is a clear need to integrate risk factors that are differentially present in men with a comprehensive theory that accounts for the fact that there is a preponderance of women among suicide ideators and attempters and a preponderance of men among suicide decedents. The overarching goal of the current study is to investigate two personality traits that are part of the traditional male gender role (i.e., stoicism and sensation seeking) in the context of a recent theoretical conceptualization of suicidal behavior that proposes different causal processes for lethal versus non-lethal suicidal behavior (i.e., the interpersonal theory of suicide; Joiner, 2005; Van Orden et al., 2010).

The interpersonal theory of suicide introduces a novel construct known as the acquired capability for suicide, which is comprised of two facets: fearlessness about death and physical pain insensitivity. In order to die by suicide, one must face the fearsome prospect of death as well as the physical discomfort necessary to withstand the act of lethal self-injury. Without this requisite degree of fearlessness about death and pain insensitivity, a person will not be capable of inflicting lethal self-harm even if he or she strongly desires to die, according to the interpersonal theory (Joiner, 2005; Van Orden et al., 2010). The acquired capability for suicide is posited to develop relatively independently of desire for suicide. Thus, an individual could have a high level of acquired capability for suicide even if he/she has never experienced suicidal ideation (Smith, Cukrowicz, Pointdexter, Hobson, & Cohen, 2010).

Viewed through the lens of the interpersonal theory, gender differences in lethal suicidal behavior may be explained by gender differences in acquired capability. Lower acquired capability for suicide among women may serve to prevent lethal self-harm in many cases, whereas higher acquired capability for suicide among men make it possible for them to enact lethal self-harm in the presence of suicidal desire. Consistent with the notion that gender differences in acquired capability may explain gender differences in...
suicidal behavior, men score higher than women do on a self-report measure of fearlessness about death (Ribeiro, Witte, & Van Orden, submitted for publication), and there is a large body of literature demonstrating that men have higher physical pain insensitivity than women (e.g., Berkley, 1997).

Despite this initial evidence that men have higher acquired capability for suicide than women, there has not been an empirical examination of personality traits that may explain this gender difference. The capability for fatal self-harm is posited to be acquired over time through repeated exposure and habituation to experiences that are painful and fear inducing (e.g., impulsive behaviors, past suicide attempts). Although exposure to these experiences is considered crucial in order to fully acquire the capability for suicide, the interpersonal theory allows for the possibility that certain personality traits may directly be associated with higher baseline fearlessness about death and/or pain insensitivity (Smith & Cukrowicz, 2010; Van Orden et al., 2010). If particular personality traits are more common in one gender versus another, this would lead to differential risk for developing the acquired capability for suicide and ultimately, differential risk for death by suicide.

Both stoicism and sensation seeking are personality traits that are associated with the traditional male gender role (e.g., Cheng, 1999; David & Brannon, 1976; Roberti, 2004; Zuckerman, Eysenck, & Eysenck, 1978) and share similar features with the acquired capability for suicide. Sensation seeking has been defined as the propensity toward engaging in behaviors that involve risk, including risk of death (e.g., Whiteside & Lynam, 2001; Zuckerman, 1979). Stoicism has been defined as the “denial, suppression, and control of emotion” (Wagstaff & Rowlledge, 1995, p. 181). This diminished display of emotions may make an individual more capable of withstanding the emotional and physical pain involved in enacting self-harm.

An emerging literature demonstrates a link between sensation seeking and acquired capability for suicide. Anestis, Bagge, Tull, and Joiner (2011) found that sensation seeking was a significant predictor of self-reported acquired capability for suicide and physical pain insensitivity. Additionally, Bender, Gordon, Bresin, and Joiner (2011) found evidence for both indirect and direct effects of sensation seeking on acquired capability, as measured by self-report. A key limitation of the Bender et al. (2011) study, however, is that they did not examine the influence of gender in their analyses, which is notable given its known association with both sensation seeking and acquired capability for suicide. Further, the self-report measure of acquired capability utilized by both studies conflates fearlessness about death with pain insensitivity; therefore, they were unable to examine specific relationships between the two facets of acquired capability for suicide and sensation seeking.

Although stoicism has not previously been examined in relation to suicidal behavior, there are several studies indicating that there is a link between stoicism and pain insensitivity (Robinson et al., 2001; Wise, Price, Myers, Heft, & Robinson, 2002; Yong, 2006). Witte (2009) found that the related construct of affective intensity (another trait that is associated with male gender; Thompson, Dizen, & Berenbaum, 2009) was negatively associated with acquired capability among men, as measured by both self-report and physical pain insensitivity. The distinction between stoicism and affective intensity is that stoicism is defined as the resolve to not display one’s emotional state, whereas affective intensity is the trait-like level of emotional arousal one typically experiences. We propose that stoicism is a more pertinent trait for explaining gender differences in suicide rates than affective intensity because engaging in lethal suicidal behavior would likely result in intense emotional arousal even in individuals with generally low affective intensity. Thus, it is the ability to endure this inevitable distress and fear that makes lethal self-harm possible, not necessarily one’s general tendency for lower emotional arousal.

The major objective of the current study was to test our hypothesis that emotional stoicism and sensation seeking account for the relationship between gender and the acquired capability for suicide. To accomplish this objective, we utilized structural equation modeling to test our hypothesis in two independent samples.

2. Methods

2.1. Sample 1 characteristics

Sample 1 was comprised of 185 undergraduates (62% male) enrolled at a large university in the Southeastern United States. We oversampled for males starting approximately halfway through the data collection process in order to ensure adequate representation of males in our sample, given that the participant pool is predominantly female. Eighty-nine percent of the participants were non-Hispanic/Latino. The racial breakdown of the sample was as follows: 78% Caucasian, 17% African-American/Black, 3% Asian, 2% American Indian/Alaska Native, and 1% Native Hawaiian/Pacific Islander, with some participants selecting more than one race. The mean age of the sample was 18.7 (SD = 1.1; range = 18–25). Participants were selected to be non-smokers because smoking has been demonstrated to reduce pain sensitivity (Pomerleau, Turk, & Fertig, 1984). In addition, participants were required to not have consumed alcoholic beverages for at least 1 h prior to participation and to not have taken any analgesics for at least 8 h before participation. To reduce error due to the possibility of asymmetry in pain sensitivity (Gobel & Westphal, 1987; Murray & Hagan, 1973; Pauli, Wiedemann, & Nicola, 1999), all participants were selected to be right-handed, and all pain threshold measurements were conducted on the participants’ right hands. Five smokers were excluded, and one participant was excluded for taking an analgesic within 8 h of participation.

Although not included in our statistical model, we administered the Beck Suicide Scale (BSS; Beck & Steer, 1991) for descriptive purposes. Scores on items 1–19 of this measure can range from 0 to 38, with higher scores indicating more severe suicidal ideation. As would be expected in an unsellected undergraduate sample, participants did not endorse severe levels of suicidal ideation. Ninety percent of our sample had a score of zero on the BSS, with all but one participant having a score of six or below. Beck and Steer do not provide clinical cutoffs for this measure; however, scores below six indicate minimal suicidality.

2.2. Sample 2 characteristics

Sample 2 consisted of 378 undergraduate students from a university in the Midwestern region of the United States. The sample was 44% male and 52% female; gender was missing for 15 participants (4%). We excluded the 15 participants for whom gender was missing, as our method of addressing missing data (i.e., direct maximum likelihood, described in more detail below) cannot compensate for missing predictor variables. Thus, our final sample consisted of 363 participants. The majority was not Hispanic/Latino (97%). The racial composition of the sample, with some participants selecting more than one race, was: 85% Caucasian, 5% African–American/Black, 11% Asian, 2% American Indian/Alaska Native, and 0.3% Native Hawaiian/Pacific Islander. The mean age of the participants was 19.7 (SD = 2.9; range = 18–39). Similar to Study 1, participants were non-smokers, right-handed, and were instructed to refrain from consumption of alcoholic beverages or analgesics for 8 h prior to the study. As in Sample 1, scores on the BSS (range = 0–20) were suggestive of minimal suicidality, with 93% of the sample scoring a 0 on this measure, and 99% scoring a 6 or below.
دریافت فوری
متن کامل مقاله

امکان دانلود نسخه تمام متن مقالات انگلیسی
امکان دانلود نسخه ترجمه شده مقالات
پذیرش سفارش ترجمه تخصصی
امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
امکان دانلود رایگان ۲ صفحه اول هر مقاله
امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
دانلود فوری مقاله پس از پرداخت آنلاین
پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات