



Research paper

Mind full of life: Does mindfulness confer resilience to suicide by increasing zest for life?



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ABSTRACT

Background: Mindfulness is a trainable skill that may enhance resilience to suicidality among vulnerable groups such as young people. The current study examined whether mindfulness protects against suicidal desire in the face of heightened risk and adversity by increasing zest for life in a sample of university students.

Methods: In a prospective design, participants ($N = 233$) were assessed at two time points over eight weeks. Online surveys included the Mindful Attention and Awareness Scale, Zest for Life Scale, Interpersonal Needs Questionnaire, Kessler Psychological Distress Scale, and items assessing suicidal ideation and suicidal intent.

Results: Baseline mindfulness was associated with lower suicidal ideation and intent at follow-up. Moderated mediation analyses confirmed the effects of mindfulness on ideation and intent were mediated by zest for life and these indirect effects were stronger at higher versus lower levels of general (psychological distress) and suicide-specific (perceived burdensomeness and thwarted belongingness) risk.

Limitations: Single item assessments of suicidal desire.

Conclusions: Findings suggest that mindfulness protects against suicidal desire in conditions of heightened risk and adversity by enhancing one's orientation towards a life worth living. Theories of suicide should consider the dynamic interplay between risk and life-sustaining resilience, while clinicians treating suicidality could use mindfulness strategies to strengthen the desire to (re)engage with life, thereby complementing direct amelioration of suicide risk factors.

1. Introduction

Suicide is the leading cause of mortality among people aged 15–44 years in Australia (ABS, 2015) and among younger age groups in other Western countries such as the United States (Glenn and Nock, 2014; Nock, 2016). Young people report higher psychological distress than the general population (Stallman, 2010) and are particularly vulnerable to the effects of interpersonally-oriented suicide risk factors, such as perceived burdensomeness and thwarted belongingness (Barzilay et al., 2015; Christensen et al., 2014; Ream, 2015). Moreover, among younger age groups, university students are at especially heightened risk for suicide (King et al., 2015). A greater focus on enhancing resilience to offset these vulnerabilities may be critical to more effective prevention. The buffering hypothesis (Johnson et al., 2011) proposes that risk and resilience exist on separate dimensions and make unique contributions to the onset of suicidality. Resilience factors are psychological attributes, processes, or abilities that attenuate the negative impact of risk factors, thereby diminishing the probability of suicidal outcomes in situations of adversity. The current study tests the effects of two

putative suicide resilience factors – mindfulness and zest for life – on suicidal desire in a sample of university students using a prospective design.

Mindfulness, the process of paying attention to present-moment experience with acceptance and non-judgment, is one factor that may be pertinent to suicide resilience since it focuses on the manner in which one reacts to and copes with stressors, rather than on directly ameliorating risk (Arch and Craske, 2006; Collins et al., 2016; Desrosiers et al., 2014). A number of randomized controlled trials have shown that clinical treatments incorporating mindfulness training reduce suicidal cognitions and behaviors (e.g., Barnhofer et al., 2015; Forkmann et al., 2014; Gunderson, 2015; Linehan et al., 2006). However, these studies do not elucidate the specific effects of mindfulness as an active ingredient in the mitigation of suicidality, nor do they provide insight into potential mechanisms by which mindfulness may reduce the likelihood of suicidal outcomes. One such potential mechanism is the enhancement of suicide resilience in the form of increased engagement with and zest for life.

Zest for life is a construct that reflects strong engagement with and a

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positive outlook on life; attributes that are associated with higher wellbeing (Peterson et al., 2007) and lower suicidality (Collins et al., 2016; George et al., 2017; Harrison et al., 2014). Positive future outlook is an important component of zest, however zest is a broader construct than optimism and hope because it also captures current engagement with and enthusiasm about life. This combination of positive present- and future-focused engagement is arguably critical for adaptive coping in contexts of adversity and for maintaining a sense that life is worth living, even if one's current circumstances are stressful or aversive (c.f., Linehan et al., 1983). Zest is also not simply the inverse of negative constructs such as depression, since factors that confer resilience exist on a separate dimension to risk and serve to buffer the association between risk factors and suicidal outcomes (Johnson et al., 2011). Thus, an absence of depression does not imply that one possesses a zest for life, and one can lack zest for life but not be depressed.

Recent experimental findings (Collins et al., 2016) showed that individuals who score higher on zest for life display greater persistence in the face of experimentally-induced perceived burdensomeness and thwarted belongingness (PB-TB), two interpersonal factors posited to be proximal antecedents of suicidal desire (Van Orden et al., 2010). Conversely, those who score lower on zest display less persistence in the face of this interpersonal adversity. Notably, this research found no differences in the persistence of high versus low zest individuals in the low adversity (i.e., low PB-TB) condition, indicating that the resilience conferred by zest was relevant only when risk was elevated. This is consistent with the buffering hypothesis which states that when risk is low, resilience factors are dormant or irrelevant, since in these conditions there is no impetus for suicidality (Johnson et al., 2011). Shifting focus to the *enhancement* of resilience, research using this experimental paradigm also showed that mindfulness training delivered both prior to (Collins et al., 2016; Study 2) and during (Collins et al., 2017) the experience of interpersonal adversity increased willingness to persist. Thus, mindfulness and zest for life are factors that confer resilience to the deleterious effects of interpersonal risk factors for suicide within the laboratory.

The present study aimed to further examine how mindfulness and zest for life and their potential interrelationship contribute to suicide resilience and prospectively affect suicidal desire. Rather than directly buffering the relationship between risk and suicidal desire, mindfulness may act as a strategic and adaptive process of more effective coping with adversity, such that the perception of and attachment to a life worth living is not diminished by these negative circumstances. Mindfulness enhances emotion regulation and non-reactivity (Davidson et al., 1976; Davidson and McEwen, 2012; Teper et al., 2013), leading to increased wellbeing and satisfaction with life despite any co-occurring stress or negative affect (Baer and Lykins, 2011; Donald et al., 2016; Hayes et al., 2011). Mindfulness also increases the capacity and desire to strive for personal goals and to live a meaningful life that is congruent with one's values (Baer and Lykins, 2011; Garland et al., 2015). A life lived with meaning and purpose may in turn generate a vitality and zest for life, even in the face of adversity (Frankl, 1959; Hayes et al., 2011). Recent evidence suggests that even small increases in the desire for life may positively influence the dynamic relationship between suicide risk and resilience over time, decreasing the likelihood of suicidal outcomes (Bryan et al., 2016).

Specifically, we tested whether mindfulness protects against suicidal desire by increasing zest for life in the face of heightened risk and adversity. Using a prospective design, we specified a conditional process model whereby mindfulness exerts an indirect effect on suicidal desire through zest for life, with this mediation effect contingent upon the level of suicide risk that is present. As depicted in Fig. 1, this model proposes that mindful awareness increases zest for life (path a) and that this heightened zest in turn acts as a buffer to reduce levels of suicidal desire at follow-up (path b). Given these buffering effects should be relevant only when risk is elevated, the strength of the indirect (resilience) pathway between mindfulness and suicidal desire via zest for

life is conditional upon the level of suicide risk factors. Our first hypothesis was that there would be a negative bivariate relationship between dispositional mindfulness at baseline and two indices of suicidal desire (ideation and intent) at follow-up. Second, in line with the buffering hypothesis, we hypothesized that the inverse relationship between baseline mindfulness and suicidal desire at follow-up would be mediated by zest for life and that these mediation effects would be stronger at higher versus lower levels of both general psychological distress and suicide-specific interpersonal adversity (i.e., perceived burdensomeness and thwarted belongingness).

2. Method

2.1. Participants and procedures

University students ($N = 233$; 163 females; $M_{\text{age}} = 25.98$, $SD = 10.47$, range: 17–74 years) completed an online survey at the beginning of the teaching semester and again at an eight-week follow-up.¹ The majority (65%) were undergraduates. Ethnicity included Caucasian-Australian (62%), European (15%), Asian (15%), and Other (8%). Participants were sent an initial invitation to participate via email and, after providing informed consent, generated their own unique identification code prior to completing the survey. Computer software with a forced-choice option was used to ensure no items were missed (Johnson, 2005). Participants had the option to view a list of available mental health resources at any point during or following completion of the questionnaires and were encouraged to make use of these resources in the event of any distress. At follow-up, participants were sent another link via email and asked to enter their unique identification code to enable data linkage with their original responses. All procedures were approved by the University's ethics review board.

3. Measures

3.1. Mindful Attention and Awareness Scale (MAAS short version; Brown and Ryan, 2003; Van Dam et al., 2010)

The MAAS (short version) is a 5-item measure assessing dispositional mindfulness, the tendency to be mindful in daily life. It is adapted from the 15-item MAAS (Brown and Ryan, 2003) and has equivalent psychometric properties (Van Dam et al., 2010). Items such as 'It seems I am "running on automatic", without much awareness of what I'm doing' are rated on a 6-point Likert scale ranging from 1 (*Almost Always*) to 6 (*Almost Never*). Responses are averaged such that higher scores indicate higher dispositional mindfulness. The MAAS was administered at baseline and again at follow-up. Internal consistency reliability was high on both occasions (baseline $\alpha = .89$, follow-up $\alpha = .92$).

3.2. Zest For Life Scale (ZLS; George et al., 2017)

The 12-item ZLS measures engagement with, and positive outlook on, life. Agreement with questions such as 'I am embracing life' and 'I try to enjoy life no matter what' is rated on a 9-point Likert scale ('not at all' to 'very strongly'), with higher scores indicating greater zest for life. The ZLS has good psychometric properties (Collins et al., 2016; George et al., 2017). The scale was administered at baseline and follow-up and internal consistency reliability was excellent at both time points (baseline $\alpha = .95$, follow-up $\alpha = .96$).

¹ Participants also took part in a study on acquired capability for suicide (George et al., 2016). While some of the variables examined here have some overlap with this existing research, the analyses in the present research are original.

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