

Worry and rumination: Differential associations with anxious and depressive symptoms and coping behavior

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Abstract

Worry and rumination are closely allied cognitive processes that impact on the experience of anxious and depressive symptoms. Using a prospective design, this study examined overlapping and distinct features of worry and rumination in relation to symptoms and coping behavior in a nonclinical sample of Singaporean college students. Worry and rumination were highly correlated, but they retained distinct components that predicted anxious and depressive symptoms differentially within and across time. Specifically, worry was uniquely associated with anxious and depressive symptoms whereas rumination was uniquely related to depression. In comparison to rumination, worry emerged as the dominant cognitive vulnerability factor that predicted increments in symptoms over time. With regards to coping behavior, low perceived coping effectiveness partially mediated the relation between worry and increases in anxiety and depression. Conversely, rumination uniquely predicted higher disengagement from problems, which resulted in further exacerbation of depressive mood. These results demonstrated not only the distinct features of worry and rumination on coping behavior, but also the different coping pathways by which they differentially impact on subsequent symptoms.

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Introduction

Worry, as described by Borkovec, Robinson, Pruzinsky, and DePree (1983, p. 10), is “a chain of thoughts and images, negatively affect-laden and relatively uncontrollable; it represents an attempt to engage in mental problem-solving on an issue whose outcome is uncertain but contains the possibility of one or more negative outcomes; consequently, worry relates closely to the fear process.” It is widely regarded as the central defining feature of generalized anxiety disorder (American Psychiatric Association, 1994). Recent theoretical and empirical developments in generalized anxiety disorder point to cognitive mechanisms (one of them being worry) that play self-protective roles (see Riskind, 2005; and special issue of *Cognitive Therapy and Research*, Vol. 29, 2005). In Borkovec’s model, for example, worry is conceptualized as a predominantly verbal abstraction process that allows individuals to turn away from internally generated emotionally evoking imagery, which then enables them to reduce emotional distress and retain a sense of control. Thus, worrying

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serves as an avoidance response that interferes with functional emotional processing and in turn prevents the extinction of fear (Borkovec, 1994; Borkovec, Ray, & Stoeber, 1998).

Nolen-Hoeksema (1998, p. 239) defines rumination as “behaviors and thoughts that passively focus one’s attention to one’s depressive symptoms and on the implications of these symptoms.” Rumination has been extensively studied in depression research (Nolen-Hoeksema, 1991, 1998), emerging as one of the important vulnerability factors that predicts the onset and maintenance of depressive symptoms (Nolen-Hoeksema, 2000; Nolen-Hoeksema, Morrow, & Fredrickson, 1993). By focusing on one’s depressed mood and its implications on oneself (e.g., how sad, unmotivated, and lethargic one feels), attention is shifted away from potentially adaptive responses to negative mood (e.g., engaging in complex problem-solving), which may subsequently lead to the maintenance of depressed mood (Nolen-Hoeksema, 1991). Furthermore, rumination can also prolong depressive symptoms by enhancing maladaptive thinking, such as endorsing distorted interpretations of events and expecting negative future outcomes (Lyubomirsky & Nolen-Hoeksema, 1995; Lyubomirsky, Tucker, Caldwell, & Berg, 1999; Pyszczynski, Holt, & Greenberg, 1987).

Relations with anxious and depressive symptoms

Although worry is typically associated with anxiety about future events, and rumination associated with depression over past events (Papageorgiou & Wells, 1999), one cannot help but notice a crucial similarity between these two constructs. Both worry and rumination are referred to as unproductive and repetitive thought processes (Segerstrom, Tsao, Alden, & Craske, 2000) that serve to exacerbate and maintain negative affect. In recent years, the assertion that worry only relates to anxiety and rumination only to depression has been challenged. Worry has been found to be implicated in depression, not just in anxiety (e.g., Molina, Borkovec, Peasley, & Person, 1998; Starcevic, 1995); and rumination has been shown to predict anxiety (e.g., Blagden & Craske, 1996; Nolen-Hoeksema, 2000).

In view that meaningful overlapping and distinct features of both worry and rumination may exist, researchers have recently started to examine the relations between worry and rumination and anxious and depressive symptoms more systematically. Using structural equation modeling, Segerstrom et al. (2000) demonstrated that repetitive thought, the common characteristic between worry and rumination, predicted anxiety and depression in student and clinical samples. In contrast, the specific components of worry and rumination failed to differentially relate to anxiety and depression, indicating that these two constructs were not as distinct as often suggested. Fresco, Frankel, Mennin, Turk, and Heimberg (2002) found distinct factors of worry and rumination in a joint factor analysis, even though the correlation between them was strong. When their relations with symptoms were examined, both worry and rumination correlated highly and similarly to anxiety and depression, suggesting an undifferentiated pattern of associations, consistent with Segerstrom et al.’s study.

In a study involving a nonclinical Dutch adolescent sample, Muris, Roelofs, Meesters, and Boomsma (2004) showed that worry and rumination emerged as distinct factors in a joint factor analysis. After controlling for rumination, worry was found to uniquely predict anxiety and depression. Conversely, when controlling for worry, rumination failed to account for a significant proportion of variance in depressive symptoms. Although their results replicated findings from previous studies (Fresco, Frankel, et al., 2002; Segerstrom et al., 2000), Muris et al. further showed that there were distinct features of worrying that uniquely predicted anxiety (and depression), whereas distinct features of rumination failed to provide any unique contribution in symptom variance. Watkins (2004) found substantial intercorrelations among worry, rumination, anxiety, and depression, but also showed that worry and rumination differ in terms of appraisals and strategies in response to intrusive thoughts.

In summary, these studies converged on the conclusion that both worry and rumination are highly similar cognitive processes, possibly sharing a common feature in repetitive thought. Nonetheless, whether worry and rumination have unique features that are differentially associated with anxiety and depression remains unclear. Although differences in the pattern of associations with symptoms may be attributed to the nature of sample (i.e., adults vs. adolescents), and the different measures used, the main reason appears to be the choice of analytic strategy. For instance, Muris et al. (2004) controlled for the overlap between worry and rumination when exploring their relations with symptoms, whereas Fresco, Frankel, et al. (2002) did not. The approach

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