

COGNITIVE DEFICITS AND DISTORTIONS IN THE PREDICTION OF SUICIDE IDEATION

Laura L. Fazakas-DeHoog (Ph.D. candidate) & David J. A. Dozois (Ph.D., C. Psych)

The University of Western Ontario; London, Ontario, Canada



INTRODUCTION:

- Research has identified numerous risk factors that are associated with suicide ideation, but suicidology literature lacks process theories of suicide ideation.
- Cognitive deficits and distortions have been implicated in the
- development of numerous psychological disorders but, to date, researchers have not investigated the importance of these factors in the development of suicide ideation.

 Cognitive distortions represent thought processes that are present but skewed and maladaptive, whereas cognitive deficits represent an absence of certain adaptive thought processes (Kendall & Dobson, 1993).

- suicide ideation

- positive self appraisal

- positive future appraisal

- hopelessness

OBJECTIVE: To assess the integrity of a Cognitive Deficits and Cognitive Distortions Model of Suicide Ideation

PARTICIPANTS: 397 (83 male & 314 female) undergraduate students registered in an Introduction to Psychology course Age ranged from 17 to 43 with a mean of 18.69

MEASURE CONSTRUCT

Beck Scale for Suicide Ideation [BSS]: (Beck. Kovacs. & Weissman.1979)

Beck Hopelessness Scale [BHS]:

(Beck & Steer, 1988)

General Attitudes Scale - [GAS-S] (Fazakas-DeHoog, 2007)

General Attitudes Scale - [GAS-F] (Fazakas-DeHoog, 2007)

Social Problem-Solving Inventory [SPSI-R] - rational problem-solving

(D'Zurilla, Nezu, & Maydeu-Olivares, 1995) Social Problem-Solving Inventory [SPSI-A] - avoidant problem-solving

(D'Zurilla, Nezu, & Maydeu-Olivares, 1995) Embedded Figures Test [EFT] - cognitive rigidity (Oltman, Witkin, Raskin, & Karp, 1971)

DESCRIPTIVE STATISTICS FOR IDEATING & NON-IDEATING

			GROOF	<u> </u>		
SCALE	NON-IDEATORS				;	
	N	MEAN	<u>S.D.</u>	<u>N</u>	MEAN	<u>S.D</u> .
BSS **	365	.22	.94	32	9.81	7.47
BHS*	365	3.02	2.96	32	6.56	5.55
GAS-S **	365	5.12	1.37	32	3.69	1.80
GAS-F **	365	5.42	1.25	32	4.19	1.69
SPSI-R	365	11.09	3.57	32	10 .47	3.28
SPSI-A *	365	5.72	3.84	32	8.50	4.10
EFT	365	3.65	1.09	32	4.12	1.80
NOTE: For gr	oup diffe	rences equa	al variances n	ot assumed;	** p < .001	; *p < .01

CORRELATIONS BETWEEN MEASURES OF COGNITIVE DEFICITS, **COGNITIVE DISTORTIONS & SUICIDE IDEATION**

	BSS	BHS	GAS-S	GAS-F	SPSI-R	SPSI-A	EFT	
BSS	-	.41 **	29 **	34 **	03	.21 **	.08	
BHS			53 **	63 **	16 **	.33 **	.06	
GAS-S				.62 *	48 **	21 **	02	
GAS-F					20 **	28 **	03	
SPSI-R						.15	01	
SPSI-A							07	
EFT							-	

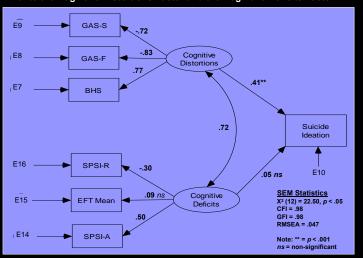
NOTE: BSS = Beck Scale for Suicide Ideation; BHS = Beck Hopelessness Scale; GAS-S = General Attitudes Scale -Self appraisal; GAS-F = General Attitudes Scale-Future appraisal; SPSI-R = Social Problem-Solving Inventory -Rational problem-solving; SPSI-A = Social Problem-Solving Inventory- Avoidant problem-solving; EFT= Embedded Figures Test

NOTE: ** p < .01: * p < .05

A COGNITIVE DEFICITS & COGNITIVE DISTORTIONS MODEL OF SUICIDE IDEATION

MEASUREMENT MODEL

With the exception of cognitive rigidity, all measures loaded significantly onto the Cognitive Distortions Factor and the Cognitive Deficits Factor.



STRUCTURAL EQUATION MODELING RESULTS

STRUCTURAL MODEL

- The resulting CFI value of .98 indicates an almost perfect fit between the estimated covariance matrix and the data from the sample.
- The resulting GFI value of .98 indicates that the model accounts for 98% of the variance in the data set with minimal residual error (RMSEA = .047).
- NOTE: Small non-significant Chi square values or CFI & GFI values greater than .90 indicate a good fitting model (Bentler, & Bonett, 1980).

CONCLUSIONS:

COGNITIVE DEFICITS & DISTORTIONS MODEL

- Cognitive Distortions had a direct impact on suicide ideation indicating that negatively skewed thinking contributes to the development of suicide ideation.
- · Cognitive Deficits had an indirect impact on suicide ideation through their impact on cognitive distortions, indicating that problem-solving deficits & an avoidant problem-solving style contribute to the development of cognitive distortions & hopelessness.
- The reciprocal relationship between Cognitive Deficits & Distortions indicated that cognitive distortions also contribute to the development of problem-solving deficits & avoidant problem-solving.

FUTURE DIRECTIONS

 The proposed cognitive deficits and distortions model needs to be tested in samples of fatal and non-fatal suicide attempters to determine how cognitive deficits and distortions contribute to suicide attempts.

REFERENCES

Beck, A. T., Kovacs, M., & Weissman, A. (1979). Assessment of suicidal intention: The Scale for Suicide Ideation. *Journal of Consulting and Clinical*

Psychology, 47, 343-352.

Bentler, P. M., & Bonett, D. G. (1980). Significance tests and goodness of fit in the analyses of covariance structures. *Psychological Bulletin, 88,* 588-606. Kendall, P. C., & Dobson, K. S. (1993). On the nature of cognition and its role in psychopathology. In K. S. Dobson & P. H. Kendall (Eds.), Psychopathology and cognition: (pp. 3-19), New York: Academic Press Inc.

The current findings are a component of the doctoral dissertation of Laura Fazakas-DeHoog

Address correspondence to Laura Fazakas-DeHoog, Doctoral candidate, Department of Psychology, University of Western Ontario: email: Ifazakas@uwo.ca Ethics approval University of Western Ontario Downloaded from http://www.laurafazakas.com

