

抑郁反刍在抑郁症中的应用

董 慧

西南大学心理学部, 重庆
Email: 1836011786@qq.com

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摘 要

抑郁反刍是个体把自我的注意力集中在抑郁的症状、原因和后果上的一种被动的、重复的反应模式, 在情感障碍的维持中起到至关重要的作用。研究表明抑郁反刍与季节性和非季节性抑郁症有密切联系。抑郁反刍是通过增加消极的思想内容, 干扰有效的问题解决, 减少社会支持等机制对抑郁症产生影响。今后的研究可以针对抑郁反刍与各种影响机制之间的关系、抑郁反刍的认知行为疗法等方面进行深入探索。

关键词

抑郁反刍, 情绪障碍, 抑郁症, 机制, 认知行为疗法

The Application of Depressive Rumination in Depression

Hui Dong

Faculty of Psychology, Southwest University, Chongqing
Email: 1836011786@qq.com

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Abstract

Depressive rumination is a passive, repetitive response pattern in which individuals focus their attention on the symptoms, causes, and consequences of depression, and plays a critical role in the maintenance of emotional disorders. Many studies indicate that depressive rumination is closely related to seasonal and non-seasonal depression. Several mechanisms have been presented to explain these findings, including increasing negative thought content, interfering with effective problem solving, and reducing social support. Finally, future studies should focus on the associa-

tion between depressive rumination and various influencing mechanisms, cognitive behavioral therapy of rumination, and so on.

Keywords

Depressive Rumination, Mood Disorders, Depression, Mechanism, Cognitive Behavior Therapy

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1. 引言

抑郁反刍被发现在许多情感障碍的维持中起到至关重要的作用,尤其是抑郁症。抑郁反刍(depressive rumination)被定义为一种反应模式,在这种模式中个体反复地、被动地关注悲伤症状以及这些症状可能的原因和结果(Nolen-Hoeksema, Wisco, & Lyubomirsky, 2008),它强调消极的思想内容和持续的自我关注相结合(Mor & Winquist, 2002)。这种重复思考的方式或过程使个体的注意力集中在他们的情绪状态上,因此抑制了更具适应性的行为或思想的产生(Nolen-Hoeksema, 1991)。反刍反应风格理论(Response styles theory, RST)假设(Nolen-Hoeksema, 1991),对抑郁情绪的反刍反应会放大悲伤情绪并导致更长的抑郁周期以及各种情绪障碍(Nolen-Hoeksema et al., 2008; Wahl et al., 2019)。据此,本文从抑郁反刍与抑郁症的关系、影响机制以及矫正手段入手,分析抑郁反刍在抑郁症这种情感障碍中的跨诊断因素作用并探讨未来可能的研究方向。

2. 抑郁反刍与抑郁症的关系

研究发现,抑郁反刍与抑郁症有强烈且持久的联系(De Raedt, Vanderhasselt, & Baeken, 2015)。具体表现为:在重度抑郁症患者中,抑郁反刍与抑郁的严重程度相关(Treynor, Gonzalez, & Nolen-Hoeksema, 2003),并可以预测抑郁症发作的初始时间和持续时间(Nolen-Hoeksema, 2000);在非抑郁个体中,更高的反刍水平同样可以预测抑郁症的发生(Nolen-Hoeksema et al., 2008),并且高反刍水平是重度抑郁症康复患者再次复发的评估指标(Ronold, Joormann, & Hammar, 2020)。自这些初步的结论以来,后续越来越多的研究(包括在儿童和青少年群体),重复验证了抑郁反刍与抑郁症相关关系的合理性(Lo, Ng, & So, 2021; Miller, Borowski, & Zeman, 2020)。此外,目前研究者探讨的关注点在于抑郁反刍的两个因子即体验性反刍(reflection, R)和评价性反刍(brooding, B)与抑郁症的关系。其中R因子指的是,用具有建设性的解决方案来思考当前情况的一种倾向,专注于解决问题,目的是减轻自我的抑郁症状(Treynor et al., 2003)。B因子是指从自我批评的角度审视当前的痛苦,是一种焦虑地或沮丧地思考,而且没有提出一个建设性的解决方案,体现的是一种消极的情绪状态(Treynor et al., 2003)。因此,B因子被认为是一种适应不良的应对消极情绪的策略,而R因子被认为是一种适应性的应对消极情绪的策略(Joormann, Dkane, & Gotlib, 2006)。在心理测量研究中,B因子在当前状态和纵向研究上都与抑郁水平呈中度正相关关系(Treynor et al., 2003)。相比之下,R因子的效应却是混合的。一些纵向研究发现,在控制了B因子的初始水平之后,R因子单独地预测了抑郁症状的增加(Hasegawa, Koda, Kondo, Hattori, & Kawaguchi, 2013; Padilla Paredes & Calvete Zumalde, 2015)。然而,另外一些研究结果却认为,R因子与积极的应对策略有关(Marroquín, Fontes, Scilletta, & Miranda, 2010),并且还可以预测抑郁症的减少(Arditte & Joormann, 2011; Eisma et al., 2015)。

以上有关 R 因子非一致结果的部分原因可以由性别和年龄来解释。具体来说,对于年幼的儿童 R 因子预示着抑郁症状的增加;然而,对于稍大一些的孩子或者成年人来说,R 因子可以预测抑郁症状的减轻。此外,R 因子预测男孩的抑郁症状总体上有所减轻,但对女孩则不然(Verstraeten, Vasey, Raes, & Bijttebier, 2010)。

季节性情绪障碍(Seasonal Affective Disorder)是指一种以季节性抑郁症复发为特征的疾病,是重度抑郁症的一种亚型。这种抑郁症通常以疲劳、睡眠增加、食欲、体重增加为特征,此外还有典型的情感和认知症状(Magnusson & Partonen, 2005)。现有研究表明季节性情绪障碍和抑郁症在抑郁反刍方面有类似的联系(Rohan, Sigmon, & Dorhofer, 2003)。一项纵向研究报告,在控制了秋季抑郁症状的严重程度之后,诊断为季节性情绪障碍个体的反刍反应方式预测了冬季症状的严重程度(Young & Azam, 2003)。此外,Hannesdóttir 等人研究发现,季节性情绪障碍与状态反刍(state rumination)和消极的抑郁倾向呈正相关关系(Hannesdóttir & Jónsdóttir, 2020)。另一项研究表明,受季节变化影响的个体在 SAD 的活跃期会产生更多的抑郁反刍、自动思维和功能失调(Rohan et al., 2011)。

3. 抑郁反刍对抑郁症产生影响的机制

综上所述可知,抑郁反刍与季节性和非季节性抑郁症紧密相关,那么它是抑郁症的直接原因吗?如果不是,这种消极的反应方式是通过什么机制对抑郁症产生影响。大量的实证研究表明抑郁反刍是通过增加消极信息的加工偏向,干扰有效的解决问题,减少社会支持等机制对抑郁症产生影响。

3.1. 抑郁反刍增加消极信息的加工偏向

消极信息加工的偏向性,包括优先注意消极信息、延迟从消极内容中分离、消极解释不明确的信息和回忆更多的消极信息,这些偏向都会增加消极思考的频率和可及性,从而消极的情绪状态得以维持,导致了更多的以及更长时间的抑郁状态(Everaert, Koster, & Derakshan, 2012)。例如,特质反刍倾向高的大学生在词汇决策任务中表现出消极解释偏差这种倾向可能会加剧消极情绪,并可能成为未来抑郁症认知行为干预的目标(Mor, Hertel, Ngo, Shachar, & Redak, 2014)。

3.2. 抑郁反刍干扰有效的问题解决

抑郁反刍也会妨碍有效的解决问题。心理学家通常认为问题解决分三个阶段:1) 定义或评估问题;2) 产生和选择解决方案;3) 实施所选有效的解决方案(D'Zurilla & Goldfried, 1971)。有证据表明,抑郁反刍会损害这三个阶段。

首先,抑郁反刍导致了大量的消极和无望的评估感知。在一项研究中,在诱导反刍和分心两种实验条件下,参与者被要求列出他们当前面临的最严重的三个问题(比如家庭、人际关系、工作、学校),然后对每个问题的严重程度以及他们是否有可能解决这个问题进行评估。结果表明与分心状态或无焦虑状态下的焦虑者相比,反刍状态下的焦虑者会认为他们的问题更严重,更难解决(Lyubomirsky, Tucker, Caldwell, & Berg, 1999)。其次,反刍条件下的临床抑郁症患者的问题解决方案不如分心条件下的有效(Lyubomirsky & Nolen-Hoeksema, 1995; Watkins & Moulds, 2005)。最后,抑郁反刍也会降低实施解决方案的意愿。原因可能是,抑郁反刍降低了个体为改善消极情绪而参与愉快事情或者分散注意力事情的意愿;另外,研究人员推测,高反刍者可能有失败的问题解决经验或者经历过抑郁症,这两种情况都会导致他们对解决问题的信心下降(Ward, Lyubomirsky, Sousa, & Nolen-Hoeksema, 2003)。总的来说,抑郁反刍的人很可能会质疑他们解决问题的能力,从而不去行动,长此以往随着消极情绪的持续,加速了抑郁症状的产生。

3.3. 抑郁反刍减少社会支持

Nolen-Hoeksema 提出抑郁反刍对人际关系起反作用, 这可能导致社会支持减少(Nolen-Hoeksema et al., 2008)。事实确实如此, 2010年 Puterman 等人研究发现, 反刍者通常会感知到较少的或更差的社会支持以及更大的社会孤立感(Puterman, DeLongis, & Pomaki, 2010)。另一项研究同样给该观点提供了证据支持, 认为抑郁反刍水平预测了未来社会支持不满的感知增强(未来九个月内)(Flynn, Kecmanovic, & Alloy, 2010)。抑郁反刍减少社会支持的原因可能在于抑郁反刍带来的长期痛苦, 加剧了个体认为自己需要更多他人帮助或建议的认知, 借助于他人或社会的支持来减轻内心的困扰。然而, 如果反刍者没有获得更多的社会支持(例如, 没有足够的人可以咨询/施助者没能起到实际作用), 抑郁反刍者可能会对他们的社会支持网络感到更加的不满。这反过来导致了更多的抑郁症状(Flynn et al., 2010)。

4. 总结和展望

4.1. 明确反刍思维与各种影响机制之间的关系

本文回顾了抑郁反刍与抑郁症的研究, 包括季节性情绪障碍。文献有力地表明, 抑郁反刍维持并加剧了悲伤情绪和抑郁症状(Hosseinihimeh, Wittenborn, Rick, Jalali, & Rahmandad, 2018; Spasojević & Alloy, 2001)。此外, 抑郁反刍对抑郁症产生影响的机制也得到了实证支持。首先, 抑郁反刍与各种消极信息的加工偏向有关, 如优先注意消极信息、延迟从消极内容中分离、消极解释不明确的信息以及回忆更多的消极信息(Krings, Heeren, Fontaine, & Blairy, 2020)。这些类型的消极思想倾向调解了抑郁反刍和抑郁症状之间的联系。其次, 抑郁反刍与问题解决能力不足有关。其表现为, 对问题的负面评价较多, 解决方法的有效性较低, 以及实施解决方案的意愿降低(Hasegawa, Kunisato, Morimoto, Nishimura, & Matsuda, 2018)。然而, 实施解决方案的意愿较低是否反映了个体对解决方案的信心下降, 还需要进一步研究。最后, 抑郁反刍和较差的社会支持感之间的联系可能反映了, 寻求更多的社会支持和面临的人际压力相互作用导致了更大的人际冲突或伤害(Flynn et al., 2010)。以上这三种机制可能是相互关联、相互影响的, 例如, 消极信息的加工偏向可能会损害解决问题的能力, 这反过来可能促使个体对社会支持的感知下降。同样, 社会支持感的下降可能引起社会排斥或冲突(McLaughlin & Nolen-Hoeksema, 2012), 从而再次加重各种消极思维和抑郁情绪。因此, 在未来的研究中研究人员应该探索其各种机制的相互作用, 以便更好地理解抑郁反刍对认知、情感机制的有害影响。同时, 将反刍思维与其他已知的抑郁症预测因素结合起来继续探索。

4.2. 以抑郁反刍为干预目标提高抑郁症治疗效果

抑郁症和抑郁反刍关系的研究证据表明, 抑郁反刍是抑郁症的一个主要的心理风险因素, 对抑郁症的治疗可能受益于识别和破坏内心的认知循环即反刍思维。因此对抑郁症的治疗可以借助治疗反刍思维为首要目标。研究结果表明, 以反刍为中心的行为疗法(Rumination-focused Cognitive Behavior Therapy, RCBT), 基于正念训练的认知疗法(mindfulness-based cognitive therapy, MBCT), 元认知疗法(Metacognitive therapy), 认知偏差矫正(Cognitive bias modification, CBM), 认知控制训练(Cognitive control training, CCT)以及自我系统疗法(Self-Systems Therapy), 这些成功地针对反刍思维为治疗目标的方法可以提高抑郁症治疗的有效性并明显改善患者的治疗结果(Spinhoven et al., 2018)。

由于本文所回顾的文献内容和研究结论, 人们可能会认为抑郁反刍是抑郁症独有的。然而, 情况并非如此。抑郁反刍也可以预测其他的临床精神疾病, 比如焦虑症、双向情感障碍、攻击行为等。此外, 抑郁反刍只是反刍思维的一种类型, 具有独特的机制。RST 主要适用于抑郁症, 还有其他一些关于反刍

思维的重要理论，比如 Martin 等人在 1989 年提出的控制理论(control theory) (Martin & Tesser, 1989)。因此，关于抑郁反刍与抑郁症的研究只是反刍思维领域的部分内容，未来关于反刍思维与其他变量之间的关系的研究有待我们进一步的探索。

参考文献

- Arditte, K. A., & Joonmann, J. (2011). Emotion Regulation in Depression: Reflection Predicts Recovery from a Major Depressive Episode. *Cognitive Therapy and Research*, 35, 536-543. <https://doi.org/10.1007/s10608-011-9389-4>
- De Raedt, R., Vanderhasselt, M.-A., & Baeken, C. (2015). Neurostimulation as an Intervention for Treatment Resistant Depression: From Research on Mechanisms towards Targeted Neurocognitive Strategies. *Clinical Psychology Review*, 41, 61-69. <https://doi.org/10.1016/j.cpr.2014.10.006>
- D'Zurilla, T. J., & Goldfried, M. R. (1971). Problem Solving and Behavior Modification. *Journal of Abnormal Psychology*, 78, 107-126. <https://doi.org/10.1037/h0031360>
- Eisma, M. C., Schut, H. A. W., Stroebe, M. S., Boelen, P. A., van den Bout, J., & Stroebe, W. (2015). Adaptive and Maladaptive Rumination after Loss: A Three-Wave Longitudinal Study. *British Journal of Clinical Psychology*, 54, 163-180. <https://doi.org/10.1111/bjc.12067>
- Everaert, J., Koster, E. H., & Derakshan, N. (2012). The Combined Cognitive Bias Hypothesis in Depression. *Clinical Psychology Review*, 32, 413-424. <https://doi.org/10.1016/j.cpr.2012.04.003>
- Flynn, M., Kecmanovic, J., & Alloy, L. (2010). An Examination of Integrated Cognitive-Interpersonal Vulnerability to Depression: The Role of Rumination, Perceived Social Support, and Interpersonal Stress Generation. *Cognitive Therapy and Research*, 34, 456-466. <https://doi.org/10.1007/s10608-010-9300-8>
- Hannesdóttir, A. H., & Jónsdóttir, S. T. (2020). EEG Band Power Analysis on the Effects of Seasonal Affective Disorder in State Rumination.
- Hasegawa, A., Koda, M., Kondo, T., Hattori, Y., & Kawaguchi, J. (2013). Longitudinal Predictions of the Brooding and Reflection Subscales of the Japanese Ruminative Responses Scale for Depression. *Psychological Reports*, 113, 566-585. <https://doi.org/10.2466/02.15.PR0.113x24z5>
- Hasegawa, A., Kunisato, Y., Morimoto, H., Nishimura, H., & Matsuda, Y. (2018). How Do Rumination and Social Problem Solving Intensify Depression? A Longitudinal Study. *Journal of Rational-Emotive & Cognitive-Behavior Therapy*, 36, 28-46. <https://doi.org/10.1007/s10942-017-0272-4>
- Hosseinihimeh, N., Wittenborn, A. K., Rick, J., Jalali, M. S., & Rahmandad, H. (2018). Modeling and Estimating the Feedback Mechanisms among Depression, Rumination, and Stressors in Adolescents. *PLoS ONE*, 13, e0204389. <https://doi.org/10.1371/journal.pone.0204389>
- Joonmann, J., Dkane, M., & Gotlib, I. H. (2006). Adaptive and Maladaptive Components of Rumination? Diagnostic Specificity and Relation to Depressive Biases. *Behavior Therapy*, 37, 269-280. <https://doi.org/10.1016/j.beth.2006.01.002>
- Krings, A., Heeren, A., Fontaine, P., & Blairy, S. (2020). Attentional Biases in Depression: Relation to Disorder Severity, Rumination, and Anhedonia. *Comprehensive Psychiatry*, 100, Article ID: 152173. <https://doi.org/10.1016/j.comppsy.2020.152173>
- Lo, B. C. Y., Ng, T. K., & So, Y. (2021). Parental Demandingness Predicts Adolescents' Rumination and Depressive Symptoms in a One-Year Longitudinal Study. *Research on Child and Adolescent Psychopathology*, 49, 117-123. <https://doi.org/10.1007/s10802-020-00710-y>
- Lyubomirsky, S., & Nolen-Hoeksema, S. (1995). Effects of Self-Focused Rumination on Negative Thinking and Interpersonal Problem Solving. *Journal of Personality and Social Psychology*, 69, 176-190. <https://doi.org/10.1037/0022-3514.69.1.176>
- Lyubomirsky, S., Tucker, K. L., Caldwell, N. D., & Berg, K. (1999). Why Ruminators Are Poor Problem Solvers: Clues from the Phenomenology of Dysphoric Rumination. *Journal of Personality and Social Psychology*, 77, 1041-1060. <https://doi.org/10.1037/0022-3514.77.5.1041>
- Magnusson, A., & Partonen, T. (2005). The Diagnosis, Symptomatology, and Epidemiology of Seasonal Affective Disorder. *CNS Spectrums*, 10, 625-634; quiz 621-614. <https://doi.org/10.1017/S1092852900019593>
- Marroquín, B., Fontes, M. T., Scilletta, A., & Miranda, R. (2010). Ruminative Subtypes and Coping Responses: Active and Passive Pathways to Depressive Symptoms. *Cognition and Emotion*, 24, 1446-1455. <https://doi.org/10.1080/02699930903510212>
- Martin, L. L., & Tesser, A. (1989). Toward a Motivational and Structural Theory of Ruminative Thought. In *Unintended Thought* (pp. 306-326). New York: The Guilford Press.

- McLaughlin, K. A., & Nolen-Hoeksema, S. (2012). Interpersonal Stress Generation as a Mechanism Linking Rumination to Internalizing Symptoms in Early Adolescents. *Journal of Clinical Child and Adolescent Psychology, 41*, 584-597. <https://doi.org/10.1080/15374416.2012.704840>
- Miller, M. E., Borowski, S., & Zeman, J. L. (2020). Co-Rumination Moderates the Relation between Emotional Competencies and Depressive Symptoms in Adolescents: A Longitudinal Examination. *Journal of Abnormal Child Psychology, 48*, 851-863. <https://doi.org/10.1007/s10802-020-00643-6>
- Mor, N., & Winqvist, J. (2002). Self-Focused Attention and Negative Affect: A Meta-Analysis. *Psychological Bulletin, 128*, 638. <https://doi.org/10.1037/0033-2909.128.4.638>
- Mor, N., Hertel, P., Ngo, T. A., Shachar, T., & Redak, S. (2014). Interpretation Bias Characterizes Trait Rumination. *Journal of Behavior Therapy and Experimental Psychiatry, 45*, 67-73. <https://doi.org/10.1016/j.jbtep.2013.08.002>
- Nolen-Hoeksema, S. (1991). Responses to Depression and Their Effects on the Duration of Depressive Episodes. *Journal of Abnormal Psychology, 100*, 569-582. <https://doi.org/10.1037/0021-843X.100.4.569>
- Nolen-Hoeksema, S. (2000). The Role of Rumination in Depressive Disorders and Mixed Anxiety/Depressive Symptoms. *Journal of Abnormal Psychology, 109*, 504-511. <https://doi.org/10.1037/0021-843X.109.3.504>
- Nolen-Hoeksema, S., Wisco, B. E., & Lyubomirsky, S. (2008). Rethinking Rumination. *Journal of the Association for Psychological Science, 3*, 400-424. <https://doi.org/10.1111/j.1745-6924.2008.00088.x>
- Padilla Paredes, P., & Calvete Zumalde, E. (2015). A Test of the Vulnerability-Stress Model with Brooding and Reflection to Explain Depressive Symptoms in Adolescence. *Journal of Youth and Adolescence, 44*, 860-869. <https://doi.org/10.1007/s10964-014-0148-1>
- Puterman, E., DeLongis, A., & Pomaki, G. (2010). Protecting Us from Ourselves: Social Support as a Buffer of Trait and State Rumination. *Journal of Social and Clinical Psychology, 29*, 797-820. <https://doi.org/10.1521/jscp.2010.29.7.797>
- Rohan, K. J., Nillni, Y. I., Mahon, J. N., Roeklein, K. A., Sitnikov, L., & Haaga, D. A. F. (2011). Cognitive Vulnerability in Moderate, Mild, and Low Seasonality. *The Journal of Nervous and Mental Disease, 199*, 961-970. <https://doi.org/10.1097/NMD.0b013e3182392948>
- Rohan, K. J., Sigmon, S. T., & Dorhofer, D. M. (2003). Cognitive-Behavioral Factors in Seasonal Affective Disorder. *Journal of Consulting and Clinical Psychology, 71*, 22-30. <https://doi.org/10.1037/0022-006X.71.1.22>
- Ronold, E. H., Joormann, J., & Hammar, Å. (2020). Facing Recovery: Emotional Bias in Working Memory, Rumination, Relapse, and Recurrence of Major Depression; an Experimental Paradigm Conducted Five Years after First Episode of Major Depression. *Applied Neuropsychology: Adult, 27*, 299-310. <https://doi.org/10.1080/23279095.2018.1550406>
- Spasojević, J., & Alloy, L. B. (2001). Rumination as a Common Mechanism Relating Depressive Risk Factors to Depression. *Emotion, 1*, 25-37. <https://doi.org/10.1037/1528-3542.1.1.25>
- Spinhoven, P., Klein, N. S., Kennis, M., Cramer, A., Siegle, G., Cuijpers, P., Bockting, C. et al. (2018). The Effects of Cognitive-Behavior Therapy for Depression on Repetitive Negative Thinking: A Meta-Analysis. *Behaviour Research and Therapy, 106*, 71-85. <https://doi.org/10.1016/j.brat.2018.04.002>
- Treynor, W., Gonzalez, R., & Nolen-Hoeksema, S. (2003). Rumination Reconsidered: A Psychometric Analysis. *Cognitive Therapy and Research, 27*, 247-259. <https://doi.org/10.1023/A:1023910315561>
- Verstraeten, K., Vasey, M. W., Raes, F., & Bijttebier, P. (2010). Brooding and Reflection as Components of Rumination in Late Childhood. *Personality and Individual Differences, 48*, 367-372. <https://doi.org/10.1016/j.paid.2009.11.001>
- Wahl, K., Ehring, T., Kley, H., Lieb, R., Meyer, A., Kordon, A., Schönfeld, S. et al. (2019). Is Repetitive Negative Thinking a Transdiagnostic Process? A Comparison of Key Processes of RNT in Depression, Generalized Anxiety Disorder, Obsessive-Compulsive Disorder, and Community Controls. *Journal of Behavior Therapy and Experimental Psychiatry, 64*, 45-53. <https://doi.org/10.1016/j.jbtep.2019.02.006>
- Ward, A., Lyubomirsky, S., Sousa, L., & Nolen-Hoeksema, S. (2003). Can't Quite Commit: Rumination and Uncertainty. *Personality & Social Psychology Bulletin, 29*, 96-107. <https://doi.org/10.1177/0146167202238375>
- Watkins, E., & Moulds, M. (2005). Distinct Modes of Ruminative Self-Focus: Impact of Abstract versus Concrete Rumination on Problem Solving in Depression. *Emotion, 5*, 319-328. <https://doi.org/10.1037/1528-3542.5.3.319>
- Young, M. A., & Azam, O. A. (2003). Ruminative Response Style and the Severity of Seasonal Affective Disorder. *Cognitive Therapy and Research, 27*, 223-232. <https://doi.org/10.1023/A:1023565427082>