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The Relationship Between Children's Beliefs About the Stability of Traits, Rumination, and Negative Affect

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This study examined the relationship between children's beliefs about the stability of personality and physical traits, their style of introspection, their attributional style, and their mood. In addition, gender differences were examined. Data was collected from fifth grade students in a suburban public elementary school in the Northeast and analyzed using correlation analyses. Significant correlations were found between rumination style and mood scale, attributional style, and stability of traits. Moreover, when analyzed by gender, a significant correlation was found between rumination style and mood.

At some point in many people's lives, clinical depression affects their mental and physical well being, causing the world to seem a bleak and hopeless place. Indeed, depression is much more common than once believed, with nearly eight percent of all Americans experiencing a severe depressive episode that leaves them unable to function for weeks, or even months (Rutter, 1986). Depression is a debilitating disorder, affecting all aspects of a person's life as well as the lives of those individuals who are involved with the afflicted party. It is an even more critical issue for women as studies have shown that women are almost twice as likely as men to develop depressive symptoms (Nolen-Hoeksema, 1990). This gender difference in depressive rates emerges during adolescence, making this developmental period an important area for study.

The existence of differing or compounding factors that impact an adolescent girl's mental health to a larger degree than boys of a similar age holds the potential to, at least partially, explain the comparatively elevated state of depression in females. There are a variety of theories regarding gender differences in adolescent depression that cover a wide range of factors including hormonal/physical changes such as the onset of puberty, increases in the number of life stressors, and socio-cultural factors that make an adolescent's role in society difficult (Nolen-Hoeksema & Girgus, 1994). There is, however, one area that has not received quite as much attention. With only a few exceptions (Didgon & Gotlieb, l983), the previous models have neglected the role that cognitive factors may play in providing a greater understanding of the change in incidence rates. During the past two decades the role of cognitive factors and their relationship with depression has been a major focus of research (Beck, l987; Ingram, Miranda, & Segal, l998).

One cognitive mechanism that may act as a protective factor against the development of depression is the tendency of children under the age of nine to view traits as more unstable than adults (Seligman, 1990). If a person believes that he or she can change negative self-characteristics into positive characteristics, then that individual is less likely to feel hopeless. This could lead to a more optimistic view of the future and create the ability to overcome setbacks more easily because they are more inclined to see them as temporary problems that can be conquered. As the child matures mentally, emotionally, and physically, a more stable view of the traits they possess emerges, perhaps for evolutionary reasons or perhaps because the child gains more insight into the implausibility of specific mechanisms of change. More and more traits are now seen as permanent unchangeable states. This increase in stability can lead to the child adopting a more pessimistic worldview thus increasing susceptibility to depression.

Another impact of trait stability can be found in the child's relationship to, and perception of, others. To the degree that the behavior of others is seen as a stable fixed response, the child might come to anticipate a greater consistency across varied situations as she grows older. That is, the developing child may begin to believe the behavior of others is predetermined. This may cause the child to make stable attributions when trying to understand the causes of negative events.

In addition to viewing the self as a more stable entity as they mature, children also develop the ability to introspect about the causality of events. Lockhart (l995) found that young children (5-6 years old) seldom use attribution information to adjust their affective response to a situation; instead the outcome and whether it is seen as positive or negative primarily determines their feelings. Older chil-

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dren, however, are more likely to use attribution information, including stable trait information, to exacerbate or attenuate their emotional response to an event. This could lead the older child to seek out reasons for feeling badly, ruminate about them, and use negative attributional information to determine a response to particular events. Although these changing beliefs do not necessarily make one depressed, this cognitive framework may act to make one more vulnerable to hopelessness in the face of negative life events and lead to depression.

If cognitive changes are a factor in the increase in vulnerability to depression, then it would be expected that older children with an increased negative mood should exhibit a pessimistic attributional style, view traits as being stable, and be high in rumination. Similarly, because the appearance of sex differences in depression begins to emerge in older children, females should exhibit higher rumination, have a more pessimistic attributional style, and possess a greater belief in the stability of traits. Earlier studies by Nolen-Hoeksema (1990) among college students found evidence that rumination is linked to persistent negative mood states and that women as a group spend more time ruminating than men. These apparent sex differences in rumination style could account for the emerging gender difference found in depression and could be an important indicator of future depression.

One socio-cultural explanation for differing cognitive processes in females may be provided by the concept of learned helplessness. In the 1960's, Seligman and his associates performed experiments in which dogs were given either a controllable or uncontrollable shock. The dogs in the "controllable shock" group quickly learned that they could turn off the shock by jumping over a short barrier. However, dogs in the "uncontrollable shock" group did not have any control over escaping the shock. Furthermore, even when the latter group was put into a situation where they could control the shock, they were unable to learn how to do so. Seligman and his associates coined this behavior "learned helplessness" (Overmier & Seligman, 1967). They also identified certain characteristics that symbolized the response of organisms to uncontrollable situations, such as decreased motivation, an inability to learn new responses to control the environment, passivity, and sadness (Seligman, 1975). Interestingly, many of these same characteristics are also indicators of clinical depression.

The theory of "learned helplessness" can be used to support the findings of increased depression levels in teenage girls. Evidence suggests that female socialization is more likely than male socialization to lead to a feeling of learned helplessness, because females are taught helplessness and dependence rather than self-reliance and self-assertion (Lips, 1997). Therefore, females do not learn that they have the ability to control their environments. According to Radloff (1980), males are more strongly socialized to believe that their responses to a situation make a difference in the outcome.

The processes used by girls to cope with stressful situations can also be affected by learned helplessness. For instance, rumination, which is the passive, repetitive focus on negative emotions, is much more common among females than males. It is theorized that because girls have less control over their environment, they ruminate over their problems in an attempt to understand their mental distress. According to Women's Health Weekly (August 17, 1998), there are gender differences in the patterns of adolescents' worrying. Girls reported being more worried about their appearance, interpersonal relationships, acceptance, and safety, issues that are not totally under their control. Boys however, reported being more concerned with "sports and other activities," issues that they tend to have more personal control over (Women's Health Weekly, August 17, 1998). Since, in general, the worries of teenage girls focus on those items over which they do not have total control they ruminate in order to deal with these problems emotionally. This constant fixation on stressful problems can arguably be a major contributor to depressive symptoms in young girls.

Similarly, Worchel (1987) suggested from her research that females have a tendency to internalize their difficulties in life, whereas males have a tendency to externalize their difficulties. It is debatable as to which method of coping is healthier, but perhaps, because females have been trained to feel unable to control their problems, they do not know how to cope in ways that could better their situation. Learned helplessness could result from all of the previous theories mentioned and from a constant buildup of feeling out of control in life.

The objective of this research is to explore the cognitive factors discussed above. This study represents the baseline of an ongoing longitudinal investigation of the hypothesis that, as children mature, they will spend more time looking inward as to the specific reasons for events, especially negative ones, and this internal introspection, or rumination, will then be related to negative mood states. Specifically, the primary goal of this study is to explore whether the sex differences that occur in rumination style are already apparent in fifth grade children and whether such tendencies are related to increased negative affect in females.

Additionally, this study will evaluate the hypothesis that fifth grade children who view negative traits as more stable will be more likely to show negative mood states than older children who do not will. It is also predicted that those children who see traits as stable and who also have a tendency to ruminate over sad feelings will be the most likely to show negative affect.

Further, the study will explore the relationship between the subject's beliefs about stability of traits and their attribution style. Studies by Nolen–Hoeksema (1990) and Seligman (1995) have found that children who have a stable global attribution style are more susceptible to negative moods. It is hypothesized that a stable global attribution style is likely to be correlated with the child's belief about stability of traits. That is, those children who are more

likely to see traits as unchangeable will be more likely to make stable attributions about events and children who view traits as more changeable will be more likely to make unstable attributions about events.

In summary, this study seeks to explore the possible relationship between beliefs about stability of traits, children's attribution style, and negative mood states. It also hopes to examine the degree to which children in this age group engage in ruminative behavior when sad and if there is a significant sex difference in rumination within this age group. This study will help contribute to our understanding of the role cognitive factors might play in the increased incidence of depressive disorders in older children as compared to younger age groups.

Method

Participants

Thirty-one children in the fifth grade, ages 10 and 11, participated in this study. Included in the study were 13 males (mean age 10.61) and 18 females (mean age 10.27). The children were recruited from an elementary school in southwestern Connecticut and were predominantly Caucasian.

Procedure

Consent forms were obtained from each participant's parent. Each participant was given eight different stories in random order. The protagonist in each story was the same gender as the participant. The participants were told that the main character in each story had the trait when they were both five and ten years old. The character was then described at 21 years of age and the participant was asked if the trait has changed and were asked the reasons for their responses. Children were then asked to fill out the CES-DC, the Children's Attributional Style Questionnaire, and the Rumination Questionnaire. Each child was interviewed individually by the data collector in a quiet room and the interviews lasted approximately 20 minutes.

Measures

Demographics. Participant's grade level, date of birth, and ages were collected.

Stability of traits. Each child was presented with the Stability of Traits Index (Lockhart, 1995). This index consists of eight short stories about boys or girls who would like to change the following traits that they possess: being a slow learner, being clumsy, being unusually short, being very mean, being shy, being ugly, being overweight, and being overly aggressive. In each story, the negative trait was present when the main character was both five and 10 years old. The character was then described at 21 years of age and the child was asked to surmise whether or not the trait had changed. In each story the participants were told that the character had never had an operation and that they did not take medicine on a regular basis. These last statements were meant to rule out the possibility of changes being attributed to external interventions.

On the traits questionnaire, responses were given a score of one, two, or three. A score of one was given to participants who said that the trait would not change, a score of two was given to participants who thought an average change would occur, and a score of three was recorded for responses that predicted an extreme positive change. The responses for each question were then totaled to give the participants their overall score. The range of possible scores was eight to 24 and higher scores indicated lower levels of the construct. The traits questionnaire had a moderate internal consistency ($\alpha = .67$) for this sample.

Rumination. Next, the participants were given a Rumination Questionnaire which included 26 Likert style, forced choice questions. The Rumination Questionnaire was developed for this pilot study to explore the participant's introspection style and included questions such as "when I'm sad, I like to listen to sad music."

For the rumination questionnaire, responses were given a Likert scaling of one to five, with a one representing never ruminating and a five representing always ruminating. The positive questions were reverse scored and the responses were then totaled to give the participant their overall score. The range of possible scores was 26 to 130 and higher scores indicated a higher level of the construct. The Rumination Questionnaire had a high internal consistency ($\alpha = .73$) for this sample.

Attributional style. Also, the participants were given a subset of The Children's Attributional Style Questionnaire—Revised (CASQ-R; Seligman et al., 1984) which was used to assess optimistic and pessimistic explanatory style. The CASQ-R consists of 24 items with six subscales providing internal, stable, and global attribution scores for both positive and negative events. Each item consists of a hypothetical event for which participants are required to choose the most likely explanation from two alternatives. A composite positive event score is calculated by adding the internal, stable, and global attribution scores for positive events. Similarly, a composite negative event score is calculated by adding the internal, stable, and global attribution scores for negative events. The overall composite score used in the present study was calculated by subtracting the composite negative event score from the composite positive event score, with lower scores indicating a more depressive attributional style. The psychometric properties of the CASQ-R have been shown to be acceptable, but not strong, with moderate internal consistency ($\alpha = .50–.73$), and fair test-retest reliability ($\alpha = .71–.80$). Each questionnaire consisted of 18 forced choice questions.

On the attribution questionnaire, responses were given a score of zero or one. The questionnaire consisted of 18 questions. Nine of the questions were positive attribution style questions and nine were negative attribution style questions. Each of the positive and negative scores was totaled and the negative score was subtracted from the posi-

tive score to give the participant their overall score. The range of possible scores was negative nine to positive nine, with higher scores indicating lower levels of the construct. Included as part of the negative score for the attributional questionnaire, the hopelessness score was determined by adding two subsets (pervasive bad events and permanent bad events) of the negative score to get the overall hopelessness score. The range of possible scores was zero to six and higher scores indicated lower levels of the construct.

Negative affect. Finally, each participant was given the Center for Epidemiological Studies–Depression Child (CES-DC) test created by Weissman and Orvaschell (1980). The original, 20-item CES-D was validated in a two-community survey that included both general and clinical populations. It was found to have high internal consistency ($\alpha = .85$ in the general population and $\alpha = .90$ in the patient sample), adequate test-retest reliability (between .45 and .70), and high convergent validity with established self-report and clinical ratings of depression (Radloff, 1977). In addition, both the CES-D and a 20-item youth version (CES-DC; Weissman, Orvaschell, & Padian, 1980) have demonstrated good reliability and construct validity with child and adolescent populations (Doerfler, Felner, Rowlison, Raley, & Evans, 1988; Faulstich, Carey, Ruggiero, Enyart, & Gresham, 1986; Garrison, Jackson, Marstellar, McKeown, & Addy, 1990; Roberts, Andrews, Lewinsohn, & Hops, 1990).

For the CES-DC, responses were given a score of zero, one, two, or three. A score of zero was given to participants who expressed not having any depressive symptoms, a score of one was given to those participants who expressed having slight depressive symptoms, a score of two was given to those participants who expressed having some depressive symptoms, and a score of three was given to those participants who expressed having a lot of depressive symptoms. The positive questions were reverse scored. The response scores were then totaled to give the participant their overall score. The range of possible scores was zero to 42 with higher scores indicating higher levels of the construct.

Results

Descriptive Statistics. The mean age for the sample was 10.42 years. The mean age for the boys sample was 10.62 years and the mean age for the girls sample was 10.28 years.

Sixteen percent (n = 31) of the participants' scores on the mood scale were above 20, the cut-off for significant negative mood symptoms (Seligman, l995). Four of the five participants who scored above 20 were females, however, this was not significant (z = 1.11, n.s.). Also, there was no significant gender difference for overall scores ($t = -0.20$, d.f. 29, n.s.).

Nineteen percent (n = 31) of participants scored below nine on the Attributional Style Questionnaire, exhibiting a pessimistic attributional style. Male participants were significantly more likely to be pessimistic than females ($t = 2.82$, d.f. 29, p. <.001).

Hopelessness was measured by adding participants' scores on the pervasive bad events and the permanent bad event items. None of the scores fell in the hopeless range. No significant difference was found between genders ($t = 0.01$, d.f. 29, n.s.).

Three percent (n = 31) of participants scored above 78 on the rumination scale, the cut off for high levels of rumination.

Overall, participants believed that traits would change in only an average positive direction over time, if at all. 57 percents (n = 31) of participants' responses indicated that negative traits would change in an average direction over time; only 15% (n = 31) of responses indicated a belief that extreme positive change was possible. 28 percents (n = 31) of participants' answers endorsed the belief that negative traits would remain stable over development. No significant gender differences were found in beliefs about changeability of traits ($t = -0.23$, d.f. 29, n.s.).

Analysis of variance revealed a significant difference between traits and their perceived stability, (F (2, 31) = 4.01 = $p < .001$). Generally, participants were less likely to believe that traits such as short, fat, and ugly would change over time than traits such as meanness, aggressiveness, and clumsiness.

Associations with Mood. As shown in Table 3, rumination scores were found to be significantly related to scores on the mood scale, attributional style scale, and beliefs about stability of traits. When analyzed by gender, a significant correlation was still found between rumination and mood (females, $r = .486$, d.f. = 29 $p<.01$; males, $r = .839$, $p<.01$).

Table 1
Descriptive Statistics for Study Measures

	Boys n = 13		Girls n = 18	
	M	SD	M	SD
Depression	11.38	6.13	11.94	8.43
Hopelessness[1]	1.62	.87	1.61	1.14
Attribution[2]	9.38	2.57	11.77	2.16
Rumination	65.30	11.20	62.06	8.92
Stability of Traits[1]	14.77	3.11	15.00	2.37

[1] Higher scores indicate lower levels of the construct.
[2] Higher scores indicate lower pessimism.

Table 2
Score and Standard Deviation for Perceived Stability of Specific Traits. N=31

Trait	M	SD
Short	1.51	.57
Aggressive	2.25	.56
Fat	1.74	.63
Ugly	1.74	.63
Clumsy	2.03	.71
Slow	1.80	.70
Shy	1.94	.68
Mean	2.00	.52

Table 3
Correlations Between Participants' Scores on the Various Measures

	Mood	Attributional	Hope-lessness	Rumination
Mood				
Attributional	-.12			
Hopelessness	-.26	-.20		
Rumination	.59**	-.44*	-.09	
Stability of traits	-.04	.10	.13	-.43*

* correlation is significant at the .05 level (2 – tailed)
** correlation is significant at the .001 level (2 – tailed)
N = 31

Discussion

The findings from this study suggest that gender differences in negative affect may not be present as early as the fifth grade. Overall, no significant difference was found between the scores of boys and girls on the mood scale at this age. This finding is consistent with other studies that have also found no significant gender differences in depression among pre-adolescents (Essau & Peterman, l999). Sixteen percent of pre-adolescent children in this sample did exhibit significant negative mood symptoms. It is interesting, moreover, that more females than males scored above the cut-off score of twenty (22% vs. 7%). Although again this difference was not significant, it might be an indication of emerging gender differences. It would be interesting to follow up this sample of boys and girls in to adolescence to see if significant gender differences do develop.

Since the mood scale only measures negative affect during the past week, it is not clear how stable the negative mood symptoms are. In this sample, increased negative mood was found to be significantly correlated with ruminative behavior for both males and females. Past research by Nolen-Hoeksema (l990) has found that passive ruminative behavior maintains negative mood. It is possible therefore that those children showing high levels of negative mood and ruminative behavior would be the most vulnerable to developing a depressive disorder.

One of the few significant gender differences found in this study was in attributional style: males were more pessimistic overall than females. A similar finding has been reported by Seligman (1995). Boys and girls did not differ from one another, however, on the hopelessness measure taken from the CASQ. Since this measure looks at attributions made for pervasive and permanent bad events, it seems that the difference between males and females may center on the attributions they make for good events. That is, males may be less optimistic about seeing good events as stable, pervasive, and due to their own actions. One might have expected females to show a more pessimistic attributional style since a pessimistic attributional style has been associated with negative mood states and since females generally are more at risk for depression. Further research should investigate whether attributions for negative events are more predictive of depression than attributions for positive events. Indeed, pessimistic attributions for the occurrence of positive events might help protect one from being disappointed if they do not occur. The pessimism shown by males for good events might actually be a defense against depressive reactions.

As stated earlier, a more pessimistic attributional style has been found to be related to depressive symptoms in children (Nolen-Hoeksema, et. al., 1991). In this study, a significant relationship was not found between a pessimistic attributional style and negative mood. Attributional style was negatively correlated with rumination. That is, those children who ruminated more were more likely to have a pessimistic attributional style. Attributional style and rumination might be risk factors for these pre-adolescent children, indicating a predisposition to developing depression following negative life events.

No gender differences were found on the rumination measure. Based on previous work by Nolen-Hoeksema it was expected that females would engage in more rumination than the males. Results of this study however, seem to be consistent with those found by Lockhart and Levy (personal communication, l998) who found no gender differences in self reported rumination. Lockhart and Levy found that although both male and female adults engaged in rumination, females tended to share their concerns with others while men kept their negative thoughts to themselves. In this study also, the boys who ruminated wanted to be left alone with their sadness and expressed the desire to withdraw from family, friends, and social activities. Perhaps this could be caused by their concept of what typical, or stereotypical, male behavior should consist of. Several males stated that when they are sad they do not want to talk to their friends about their sadness. Conceivably, they be-

lieve that discussing their sadness is a sign of weakness and opens them to criticism from their peers. Girls however may be more likely to share their worries with other girls. Perhaps this sharing with others, however, gives validity to their worries and concerns and further exacerbates them, worsening their mood state.

The participants in this study were less optimistic about changing negative traits than younger children. Lockhart et al. (in press) found that young children generally believe that negative traits can change in the extreme positive direction over development. This has been found to be true for both physical and psychological traits. The pre-adolescent children in this study, however, believed that only average change, if any, was possible. As in other studies, certain traits were seen as more malleable than others. Interestingly, negative traits relevant to the self image of girls were seen as the most stable, e.g. fat and unattractive, whereas the negative trait of clumsiness or poor athletic ability, a trait of importance to boys' self image, was perceived as very malleable (Lockhart et al., in press). Pre-adolescent girls' beliefs about the stability of such traits as attractiveness and weight might make them more vulnerable to negative mood states if they possess negative instances of those traits. In the present study, no significant relationship was found between negative mood state and a belief in the stability of traits. Again, seeing traits as more stable is probably only a risk factor for depression that comes into play when a person believes they possess negative traits, a belief that may be triggered by negative life events.

There was a significant correlation between rumination and belief in stability of traits. That is, those children who spent more time thinking about their problems were more likely to view traits as stable. Since belief in the stability of traits is characteristic of adults, this correlation may simply reflect the fact that those people who are more cognitively mature are more likely to worry or ruminate. A study that examines the relationship between these two variables in an adult population would be able to shed further light on this. Overall, the rumination scale was the measure most strongly related to negative mood as well as other measures of pessimism (CASQ and Stability of Traits). Without other comparison groups, it is unclear whether the level of rumination shown by this pre-adolescent group is similar or different from that of other age groups. Further research should be conducted with other age groups to better understand developmental differences. Similarly, assessments should be taken of subjects across time and with other measures in order to examine the reliability and validity of this scale.

Future Studies

With the exception of the rumination scores, most of the scores showed only slight interrelationships. However, the relationship between these measures may become stronger with age and a higher rumination style may lead to later development of a pessimistic style. Therefore, further investigation, by conducting a longitudinal study with this same sample of children should be conducted. The study should strive to determine if those who were high in rumination, low in attributional style, and had a belief in the stability of traits were the same individuals that exhibit depressive symptoms later in life.

Conclusion

Cognitive changes are factors that may increase an individual's vulnerability to depression. Children who have high rumination, have a pessimistic attributional style, and view traits as stable are more susceptible to negative mood. It is unclear as to the exact age where gender differences emerge. Additional studies are necessary in order to develop a deeper insight into developmental differences.

Historically, children were not considered candidates for depression (Whitley, 1996). Mostly due to Freudian notions about the unconscious, depression had been viewed as a condition that only affected adults. Today, childhood depression is widely recognized and health professionals see depression as a serious condition effecting both adolescents and young children (Whitley, 1996; Lamarine, 1995). One of the factors that make depression so difficult to diagnose in adolescents is the common behavioral changes that are normally associated with the hormonal changes of this period (Lamarine, 1995). It has only been in recent years that the medical community has acknowledged childhood depression and viewed it as a condition that requires intervention.

It is obvious that the added pressures, stresses, and societal norms placed on today's adolescents make them much more susceptible to depression than ever before. The financial, emotional, and physical impact of depression represents an enormous burden on humanity. Society, as a whole, needs to be educated as to the detrimental effects of depression on adolescents' health, as well as take steps to develop the means to treat and eventually prevent this debilitating disorder. It is important that we endeavor to understand the causality of all factors. If adults are to notice, and hopefully treat adolescent depression, it is necessary to know which factors contribute to the decline in mental well being in the first place.

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