New Research From Clinical Psychological Science

March 02, 2022



Imagery Rescripting Versus Extinction: Distinct and Combined Effects on Expectancy and Revaluation Learning

Mandy Woelk, Julie Krans, Filip Raes, Bram Vervliet, and Muriel A. Hagenaars



Imagery rescripting (ImRs) is an intervention in which patients with anxiety caused by traumatic events reimagine and rescript the events. Extinction procedures are interventions based on conditioned learning to adjust the expectancy of an aversive outcome and thus diminish the fear it causes. Woelk and colleagues compared the effects of ImRs with the effects of extinction procedures on aversive-outcome expectancy and reevaluation, using an aversive film clip as the traumatic event and measuring fear reinstatement. Results indicated that ImRs did not diminish event expectancy or cause a reevaluation, although it did appear to reduce fear reinstatement. Extinction procedures did diminish event expectancy. A combination of both methods hindered the speed and effectiveness of extinction.

HiTOP Is Not an Improvement Over the DSM

Gerald J. Haeffel et al.

In this commentary, Haeffel and colleagues argue that DeYoung and colleagues (2022) did not address several flaws of the Hierarchical Taxonomy of Psychopathology (HiTOP). Among other flaws, they suggest that the HiTOP is not an empirical structure of psychopathology because it was created using an analytic approach that does not adequately represent the dimensional space of the symptoms of psychopathology. They argue that the HiTOP is not ready to be used in real-world clinical settings because there is no empirical evidence that it leads to better clinical outcomes than the Diagnostic and Statistical Manual of Mental Disorders (DSM).

The Interplay Between Reward-Relevant Life Events and Trait Reward Sensitivity in Neural Responses to Reward Cues

Iris Ka-Yi Chat et al.

According to the reward-hypersensitivity model, individuals who are hypersensitive to rewards should show hyper-approach motivation following exposure to life events that activate the reward system (i.e., goal attainment) and hypo-approach motivation following exposure to life events that deactivate the reward system (i.e., goal failure). During a monetary-incentive-delay task, Chat and colleagues assessed brain activation of individuals with high or moderate trait reward sensitivity. Participants also reported the frequency of positive and negative common events in their lives. The results were partially consistent with the model: Participants' trait levels of reward sensitivity moderated the relationship between their exposure to reward-relevant life events and their reward-related brain function. Specifically, exposure to reward-relevant life events and trait reward sensitivity jointly appeared to moderate brain activity moderate OFC during reward anticipation but not outcome.

An Epidemiologic, Longitudinal, and Discordant-Twin Study of the Association Between Gambling Disorder and Suicidal Behaviors

Wendy S. Slutske, Christal N. Davis, Michael T. Lynskey, Andrew C. Heath, and Nicholas G. Martin

This research suggests that the relationship between gambling disorder and various suicidal behaviors may be complex and may differ between men and women. Slutske and colleagues used data from a longitudinal Australian discordant-twin study (i.e., with pairs of twins in which one is affected by gambling and the other is not) to test whether gambling disorder may cause suicidality. Results suggested a potential causality between gambling and suicide attempt among men but not women, which might reflect men's greater propensity to have gambling-related financial problems. Among women but not men, however, genetic influences appeared to contribute to an association between gambling and suicidal thoughts.

Negative Affectivity and Disinhibition as Moderators of an Interpersonal Pathway to Suicidal Behavior in Borderline Personality Disorder

Timothy A. Allen, Michael N. Hallquist, Aidan G. C. Wright, and Alexandre Y. Dombrovski

Personality traits may influence the link between interpersonal dysfunction and suicide. In a study of individuals with bipolar disorder assessed annually for up to 30 years (mean number of follow-ups = 7.82), Allen and colleagues found that individuals with higher negative affectivity tended to experience more interpersonal dysfunction (i.e., difficult relations with peers, colleagues, and/or family) coupled with suicidal ideation. They also found that individuals with higher disinhibition tended to show a higher coupling of suicidal ideation and suicide attempts. These findings highlight the value of assessing negative affect and disinhibition to identify people at highest risk for interpersonally triggered suicidal behaviors.

Parental Mentalizing During a Pandemic: Use of Mental-State Language on Parenting Social Media Before and During the COVID-19 Pandemic

Tal Yatziv, Almog Simchon, Nicholas Manco, Michael Gilead, and Helena J. V. Rutherford

Yatziv and colleagues compared parenting-related posts on Reddit from two time periods during the early months of the COVID-19 pandemic, March to April 2020 (lockdown) and July to August 2020 (postlockdown), with posts from time-matched control periods in 2019. They measured parents' ability

to mentalize (i.e., understand mental states that underlie behavior). Results indicated that parental mentalization content decreased during the pandemic: Posts referred less to mental activities and other people in 2020 and showed decreased self-references and affective and cognitive mental-state language, specifically during lockdown, and more so in father-specific subreddits than in mother-specific subreddits. These findings suggest that mentalizing is compromised under stressful caregiving contexts.

Moral Injury, Traumatic Stress, and Threats to Core Human Needs in Health-Care Workers: The COVID-19 Pandemic as a Dehumanizing Experience

Sarah L. Hagerty and Leanne M. Williams

The COVID-19 pandemic provides a context to study the relationship between psychological injury and unmet basic human needs (e.g., social connection) and traumatic stressors. Hagerty and Williams surveyed 1,122 health-care workers from the United States between May 2020 and August 2020. Nearly one third of respondents reported elevated symptoms of psychological trauma, and the prevalence of suicidal ideation was roughly 3 times higher than in the general population. Moral injury—experiences that transgress one's values or morals (e.g., a doctor having to decide which patients to let die)—and loneliness (an unmet basic human need) predicted greater symptoms of traumatic stress and suicidality.

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