

New Research in Clinical Psychological Science

July 27, 2017

Read about the latest research published in *Clinical Psychological Science*:

[Unpacking Rumination and Executive Control: A Network Perspective](#)

Emily E. Bernstein, Alexandre Heeren, and Richard J. McNally

Rumination is defined as perseverative passive self-focused thinking about aspects of one's affective state. Rumination has been identified as a potential transdiagnostic vulnerability factor for affective disorders and is hypothesized to arise from impairments in executive control. The researchers examined the interactions of three executive-control processes (set shifting, updating working memory, and inhibition) and their influence on rumination. Participants were assessed for basic working memory, inhibitory control, and set-shifting ability using *n*-back, emotional-flanker, and internal-shift tasks. Participants completed stress-inducing tasks, sat for 5 minutes, and then completed measures of rumination. The researchers used network analytic measures to examine the relationship of components of ruminative response to aspects of executive control. Although self-criticism was found to be central in the computed networks, series of bidirectional and multimode loops were also apparent. The findings indicate that current conceptions of the relationship between executive control processes and rumination may be oversimplified.

[The Bereavement Exclusion Debate in the DSM-5: A History](#)

Peter Zachar, Michael B. First, and Kenneth S. Kendler

The last major revision of the *Diagnostic and Statistical Manual of Mental Disorders* brought changes to the diagnostic criteria of disorders. One such change was the elimination of the bereavement-exclusion rule, in which a depressive episode following the loss of a loved one was considered to be a normal grief reaction so long as it lasted less than 2 months and did not include certain severe symptoms. This article takes a step-by-step look at the history behind this change and the factors influencing the revision committee's decision by describing information gained through interviews with those involved in the debate surrounding this change. In reviewing the background behind this decision, the authors also raise important questions regarding the way mental disorder is differentiated from normal psychological functioning.

[Larger Receptive Field Size as a Mechanism Underlying Atypical Motion Perception in Autism Spectrum Disorder](#)

Kimberly B. Schauder, Woon Ju Park, Dujie Tadin, and Loisa Bennetto

Studies have observed that individuals with autism spectrum disorder (ASD) display atypical visual

motion perception. Impairments in gain control — an inhibitory mechanism that prevents over-responding to high-contrast stimuli — and differences in receptive-field size have been proposed to explain atypical motion perception patterns in this population. The researchers tested these hypotheses by having 40 children and adolescents, half with ASD, discriminate the motion direction of circular gratings of different sizes and contrasts. The duration of each stimulus was varied to manipulate task difficulty. The researchers found impaired motion processing in participants with ASD when stimuli were small across all contrast levels. This finding is inconsistent with predictions from the impaired-gain-control hypothesis and instead supports hypotheses positing that receptive-field differences in those with ASD may underlie motion-processing impairments.