## Grief and Loss During the COVID-19 Pandemic: Exploring perceived physical health as a predictor for rumination

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#### Methods

#### **Participants**

• 70 Arizonans (67.1% female, 70% non-Hispanic White) within the first year of bereavement.

#### Measures

- Utrecht Grief Rumination Scale (UGRS)
- 2. Center for Epidemiologic Studies
  Depression Scale (CES-D)
- 3. Prolonged Grief Disorder-13 (PG-13)
- 4. Perceived physical health was measured using a 5-point Likert scale (5 = excellent, 0 = poor)

#### Procedure

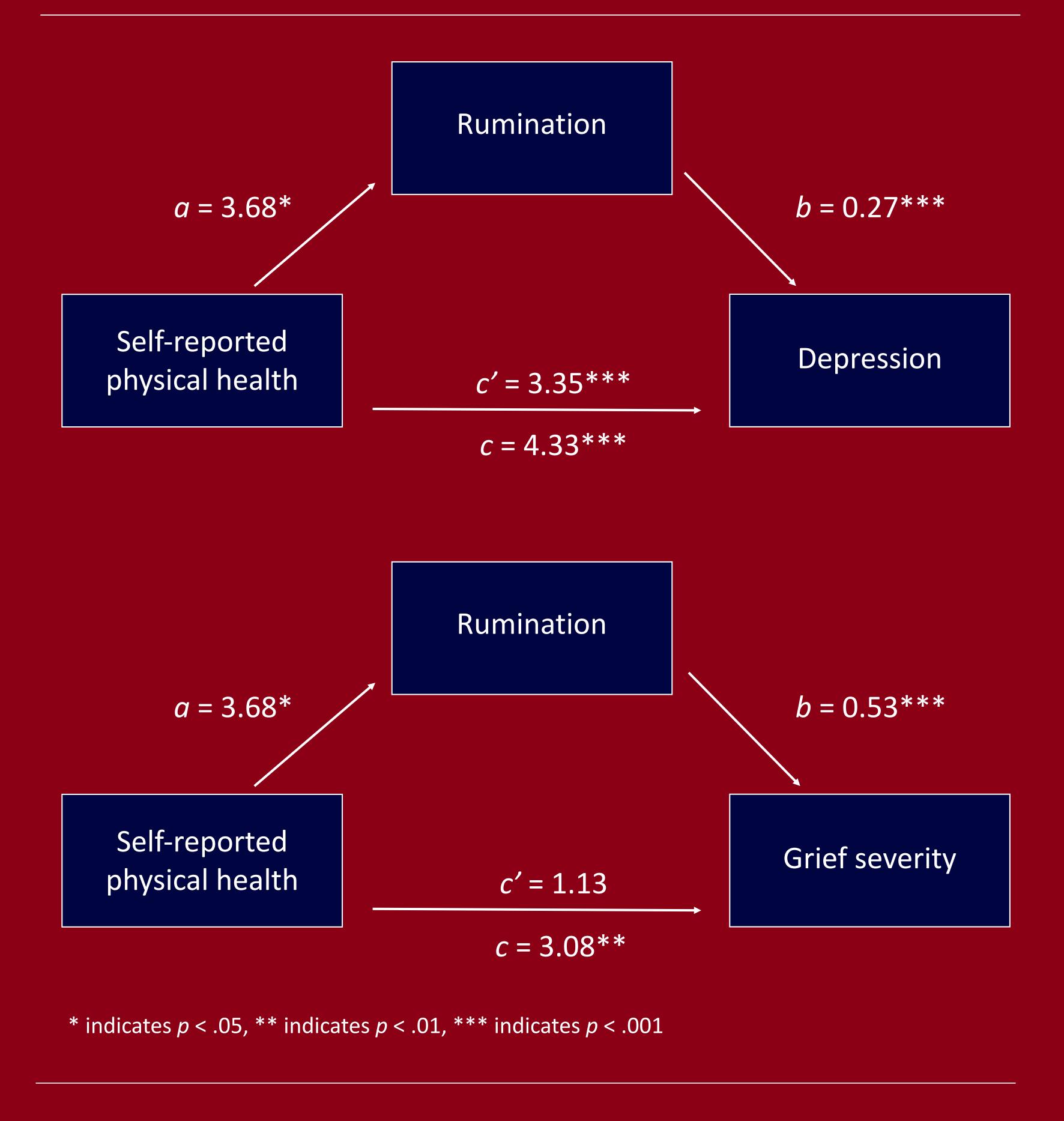
 Participants were recruited from a preliminary study sample for a semistructured phone interview.

#### **Analyses**

- Linear regression analyses were conducted to explore self-reported physical health as a predictor for griefspecific rumination, depression, and grief severity.
- Two mediation analyses were used to examine whether rumination mediated the effect of self-reported physical health on grief severity and depression.
  - The indirect effect was tested using bootstrapping with 10,000 samples.

Ruminative thought predicts complicated grief, hinders the adjustment to loss by acting as a cognitive avoidance strategy, and is associated with negative health consequences.

Self-reported physical health has been shown to be indicative of documented physical health.



Using self-report measures to assess physical health may offer more accessible insights as it relates to psychological health outcomes—especially in a time of social distancing.

## Q1: Does self-reported physical health predict grief-specific rumination, depression, and grief severity?

Linear regression analyses showed that self-reported physical health predicted:

- Grief rumination, F(1, 68) = 4.81, p < .05
- Depression, F(1, 68) = 28.95, p < .001
- Grief severity, F(1, 68) = 8.19, p < .01

# Q2: Does grief-specific rumination mediate the effect of self-reported physical health on depression and grief severity?

Bootstrapped mediation analysis indicated that grief-specific rumination mediated the association between self-reported physical health and depression (ab = 0.98, SE = 0.45, 95% CI [0.16, 1.93]).

• The total effect of self-reported physical health on depression was significant, b = 4.33, SE = 0.79, p = 0.000, as was the direct effect of self-reported physical health on depression, controlling for rumination, b = 3.35, SE = 0.68, p < .001.

Analyses revealed that grief-specific rumination also mediated the association between self-reported physical health and grief severity (ab = 1.95, SE = 0.86, 95% CI [0.30, 3.73]).

• The total effect of self-reported physical health on grief severity was significant, b = 3.08, SE = 1.06, p < .01, whereas the direct effect of self-reported physical health on grief severity, controlling for rumination, was not significant, b = 1.13, SE = 0.62, p = 0.07.

