



Negativity bias and instability in spontaneous and deliberate evaluations of others: The role of borderline personality features



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ABSTRACT

This study tested the hypotheses that borderline personality (BP) features are characterized by a negativity bias and instability in spontaneous and deliberate evaluations of others. Undergraduate women ($N = 204$) watched two movie clips depicting either positive or negative conjugal interactions. Spontaneous and deliberate evaluations of the male character were assessed after each clip with an Evaluative Priming Task and a self-report measure, respectively. Participants with high BP features showed unstable spontaneous evaluations. Results revealed a non-significant trend toward more negative spontaneous evaluations after the negative clip and less positive and more negative deliberate evaluations after watching the positive clip first relative to participants with low BP features. These results provide preliminary evidence that impression formation in borderline personality may be characterized by negative and unstable evaluations that are shaped at least in part at earlier processing stages.

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1. Introduction

Clinical theories of borderline personality disorder (BPD) emphasize the key role of negativity and instability in the identity and interpersonal dysfunctions of individuals with BPD (Beck, Freeman, & Davis, 2004; Kernberg, 1986; Leichsenring, Leibling, Kruse, New, & Leweke, 2011; Lieb, Zanarini, Schmahl, Linehan, & Bohus, 2004). To better understand negativity and instability, BPD research has combined different techniques, including self-report, behavioral, and neurobiological techniques. These research tools have brought ample evidence of negativity biases in BPD. Recently, BPD research has begun to integrate another set of measurement instruments, namely *implicit measures*, to examine negativity at the spontaneous level of responding. So far, no study has combined implicit and explicit measures to examine the interplay between spontaneous and deliberate responses in BPD. In contrast, social cognition research has fruitfully combined explicit and implicit

measures to study a plethora of psychological phenomena (for a review, see Gawronski & Payne, 2010), including depression and anxiety (for a review, see Teachman, Joormann, Steinman, & Gotlib, 2012). Hence, the main goal of the present study was to fill this gap in the BPD literature by examining spontaneous and deliberate evaluations in borderline personality using both implicit and explicit measures.

There are several reasons to use implicit measures in BPD research. First, implicit measures capture spontaneous responses that are not necessarily reflected in explicit measures, and the combined use of both measurement instruments can shed light on the interplay between spontaneous and deliberate evaluations. According to the associative–propositional evaluation (APE) model, spontaneous evaluations assessed by implicit measures represent affective gut reactions resulting from the activation of mental associations in memory. In contrast, deliberate evaluations assessed by explicit measures represent more controlled beliefs and are shaped at later processing stages. Because spontaneous and deliberate evaluations are the outcomes of different underlying processes, responses on implicit and explicit measures often diverge and the APE model provides explanations of such dissociations in terms of the respective processes and operating principles guiding

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the two kinds of evaluations (for a discussion and a review of the evidence supporting the model, see [Gawronski & Bodenhausen, 2006](#); [Gawronski & Bodenhausen, 2011](#)). With this distinction in mind, we focus on two key features that are believed to characterize evaluations of others in borderline personality, namely the notions of *negativity bias* and *instability*.

2. Negativity bias and instability in BPD

Negativity bias and instability are hallmark features of BPD. The negativity bias refers to the tendency to evaluate stimuli through a negative lens. According to DSM-V, BPD individuals are selectively biased toward negative attributes in their evaluations of others ([American Psychiatric Association, 2013](#), p. 766). Similarly, the cognitive theory of BPD hypothesizes that dysfunctions of individuals with BPD are at least partly caused by maladaptive cognitive schemas (basic cognitive structures in memory) that bias the evaluation and interpretation of environmental stimuli, including the basic assumption that the world is dangerous and malevolent ([Beck & Freeman, 1990](#); [Beck et al., 2004](#)). Psychodynamic theories also highlight the phenomenon of negative or malevolent evaluations ([Kernberg, 1986](#)).

Different studies yielded evidence that individuals with BPD interpret reality through a negative lens. For example, Arntz and colleagues conducted a series of studies in the laboratory and found a stronger tendency in BPD to describe others in a more negative manner ([Arntz & Veen, 2001](#); [Sieswerda, Arntz, & Wolfis, 2005](#); [Sieswerda, Barnow, Verheul, & Arntz, 2013](#); but see also [Arntz & Haaf, 2012](#), for disconfirming evidence). Similarly, [Barnow et al. \(2009\)](#) showed that individuals with BPD formed more negative evaluations of neutral interpersonal stimuli. In addition, there is behavioral evidence of negativity biases in facial emotion recognition in BPD, such as a heightened sensitivity to the detection of negative emotions, along with a negativity or anger bias (for a review, see [Domes, Schulze, & Herpertz, 2009](#)). Neurobiological findings suggest that the negativity bias in BPD might stem from a hyperreactivity of limbic brain areas and a hyporeactivity of prefrontal areas in response to negative socio-emotional stimuli as well to neutral social stimuli (for a review, see [Krause-Utz, Winter, Niedtfeld, & Schmahl, 2014](#)). There is also physiological evidence for a negativity bias in the patterns of physiological reactivity of individuals with BPD. For example, [Matzke, Herpertz, Berger, Fleischer, and Domes \(2014\)](#) found that individuals with BPD displayed reduced facial responding to positive social signals and increased facial responding to negative social signals. Moreover, there is ample evidence that rejection is a common theme to the negative reactions of individuals with BPD. For instance, they are more prone to perceive rejection when actually rejected, but also when not rejected ([Renneberg et al., 2012](#)), and to endorse beliefs and expectations that they will be rejected or abandoned ([Dressen & Arntz, 1995](#); [Staebler, Helbing, Rosenbach, & Renneberg, 2011](#)). Together, these findings obtained with diverse methods that individuals with BPD interpret social information through a negative lens and evaluate other people negatively.

Along with the negativity bias, another hallmark feature of BPD is instability, including instability in affect, relationships, and evaluations of the self and others. According to DSM-V, individuals with BPD view close relationships in extremes of idealization and devaluation and alternate between overinvolvement and withdrawal ([American Psychiatric Association, 2013](#), p. 766). In its psychodynamic theory, [Kernberg \(1986\)](#) also described a tendency in individuals with BPD to switch between all-positive and all-negative experiences of self and others. [Kernberg \(1986\)](#) further hypothesized that instability in BPD stems from the mechanism of splitting; specifically, he argued that the extreme and polarized affective and

interpersonal experiences of individuals with BPD, coupled with their difficulty integrating such experiences into more nuanced representations, leads them to form all-negative or all-positive evaluations of self and others and to switch between these two polarities. The cognitive notion of dichotomous thinking similarly captures the tendency of individuals with BPD to evaluate their experience through mutually exclusive categories (black or white) instead of more nuanced shades of grey ([Beck & Freeman, 1990](#); [Beck et al., 2004](#)). Past research has obtained empirical support for the view that BPD involves splitted evaluations of self and others, as evidenced by polarized relationship experiences ([Coifman, Berenson, Rafaeli, & Downey, 2012](#)), less integration in self evaluations, less stability in evaluations of self and others over a 3-h period ([Beeney, Hallquist, Ellison, & Levy, 2016](#)), compartmentalized self-concept structure ([Vater, Schroeder-Abe, Weissgerber, Roepke, & Schuetz, 2015](#)) and greater diffusion of positive self evaluations and greater interconnection of negative self evaluations ([Evans et al., 2015](#)), as well as more extreme evaluations of film characters ([Veen & Arntz, 2000](#)) and alleged mental health worker trainees ([Arntz & Haaf, 2012](#)). Although these studies support the view that BPD involves polarized or extreme evaluations of others and difficulties integrating such evaluations, only two studies ([Beeney et al., 2016](#); [Coifman et al., 2012](#)), to the best of our knowledge, have used temporal measurements and supported the notion that BPD indeed involves unstable evaluations of others, defined in terms of switches between positive and negative evaluations of others.

3. The present study

The present study was designed to further investigate evaluations of other people in borderline personality, expanding previous research in three ways. First, this is the first study to examine spontaneous evaluations of other people in borderline personality using an implicit measure. Previous studies have examined spontaneous evaluations of self in patients with BPD (e.g., [Hedrick & Berlin, 2012](#); [Rusch et al., 2007](#)), but not spontaneous evaluations of other people.

Second, it investigated whether borderline personality involves not only more negativity in evaluations of other people, but also more instability. In fact, dichotomous thinking and splitting have been hypothesized to manifest not only as more negative evaluations, but also as switches between positive and negative evaluations. Moreover, instability is a DSM-V criterion of BPD ([American Psychiatric Association, 2013](#)). Despite ample evidence that BPD involves negativity biases, polarization (extreme evaluations) and difficulties integrating evaluations, only two studies, to the best of our knowledge, have found evidence that individuals with BPD display more instability in the way they evaluate others ([Beeney et al., 2016](#); [Coifman et al., 2012](#)). These two studies focused on participants' real-life relationships. Complementing this approach, the present study involved a standardized procedure in the laboratory where all participants evaluated the same target person. In order to examine negativity and instability more thoroughly, the method also allowed distinguishing between the positive and negative evaluative dimensions as well as between positive and negative interpersonal contexts.

Third, our study used a dimensional approach to borderline personality and assessed borderline personality by means of a questionnaire instead of a diagnostic interview. This was done to reflect the continuum of severity in the distribution of features of BPD. Previous research has brought empirical evidence that BPD is not a discrete trait, but rather the extreme manifestation of a normally distributed personality disposition (e.g., [Edens, Marcus, & Ruiz, 2008](#); [Haslam, 2003](#); [Rothschild, Cleland, Haslam, & Zimmerman, 2003](#)). Furthermore, individuals who endorse

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