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Using a measure of cognitive distortion to examine the relationship between thought suppression and borderline personality features: A multi-method investigation

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ABSTRACT

Previous research has demonstrated that thought suppression is an effortful emotion regulation strategy frequently used to avoid unwanted thoughts or emotions. This is a maladaptive strategy because it paradoxically increases the frequency of the unwanted thoughts or emotions. Although thought suppression has been linked to borderline personality disorder (BPD), most research has relied on self-report measures. This study employed a laboratory task (the Scrambled Sentences Test) assessing BPD-specific cognitive distortions to examine relationships between thought suppression and BPD features in a sample of undergraduate students ($n = 181$) including many with high levels of BPD features. Severity of BPD features was significantly correlated with the tendency to unscramble strings of words to create BPD-consistent sentences. This effect was more pronounced when the task was completed under a cognitive load (remembering a 6-digit number). Mediation models using bootstrapping suggested that this relationship may be explained by the tendency to engage in thought suppression. These results offer multi-method evidence for the proclivity to suppress unwanted and distorted cognitions in BPD.

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1. Introduction

Borderline personality disorder (BPD) is a serious and prevalent condition that includes unstable interpersonal relationships, severe externalizing and impulsive behavior, heightened emotional reactivity, intense negative affect, and identity disturbances (American Psychiatric Association, 2000). Maladaptive cognitive processes, including distorted beliefs and attempts to suppress unwanted thoughts, are strongly associated with the severity of BPD features (Baer, Peters, Eisenlohr-Moul, Geiger, & Sauer, 2012). Most previous research has relied on self-report measures to assess these variables. The present study used a cognitive processing task to examine relationships between BPD features, cognitive distortions, and thought suppression.

1.1. Cognitive distortions in BPD

According to cognitive theorists, cognitive distortions are central to BPD, influencing how people with the disorder view themselves and the world and contributing to their intense negative emotions (Beck, Freeman, & Davis, 2004). Several models of

distorted beliefs in BPD have been proposed. Beck and Freeman (1990) suggested that people with BPD are likely to endorse beliefs that they are bad, powerless, and vulnerable, and that the world is dangerous. Similarly, Pretzer (1990) proposed that three core beliefs underlie borderline pathology: the world and other people are dangerous and malevolent; the self is powerless and vulnerable; and the self is unacceptable and deserving of punishment. Empirical studies are generally consistent with these theoretical models. Although people with BPD endorse a wide range of negative beliefs, including those typical of many other disorders (Arntz, Dietzel, & Dreesen, 1999), particular beliefs have been shown to be especially common in BPD and to discriminate BPD from other personality disorders. These beliefs focus on distrust of others, rejection by others, dependency, helplessness, neediness, loneliness, unlovability, and the self as deserving of punishment (Arntz et al., 1999; Bhar, Brown, & Beck, 2008; Butler, Brown, Beck, & Grisham, 2002).

1.2. Thought suppression in BPD

Thought suppression is the intentional attempt to push unpleasant or unwanted cognitions out of one's consciousness. It is conceptualized as a maladaptive emotion regulation strategy because it paradoxically increases the frequency of the unwanted thoughts and associated negative affect (Wegner, 1992; see Abramowitz, Tolin, & Street, 2001, for a review). Studies have

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shown strong links between thought suppression and BPD symptoms, all utilizing self-report measures of thought suppression. Thought suppression was a stronger predictor of BPD features than automatic thoughts and dysfunctional attitudes (Geiger, Peters, Sauer-Zavala, & Baer, 2013). Thought suppression fully mediated the relationship between negative affect intensity/reactivity and BPD features and partially mediated the relationship between perceived parental criticism and BPD features (Cheavens et al., 2005), as well as fully mediated the relationship between an invalidating childhood environment and current symptoms of BPD (Sauer & Baer, 2009). These studies suggest that individuals who are more emotionally vulnerable and experienced invalidating parenting may be more prone to developing BPD features when thought suppression is used as an emotion regulation strategy. Thought suppression may persist because it relieves negative affect in the short term; however, over time, it likely leads to increased frequency and intensity of unwanted thoughts and emotions, subsequently requiring more extreme emotion regulation strategies such as parasuicidal behavior and drug use (Rosenthal, Cheavens, Lejuez, & Lynch, 2005; Chapman, Specht, & Cellucci, 2005).

1.3. Using a laboratory task to assess cognitive distortions and thought suppression

Cognitive distortions and thought suppression are typically assessed using self-report methods, which may be susceptible to self-presentation strategies or demand characteristics. As an alternative, some authors have explored the use of the Scrambled Sentences Test (SST; Wenzlaff & Bates, 1998), a laboratory task in which participants are asked to rearrange six-word strings to create 5-word sentences (omitting one word). Depending on the omitted word, the unscrambled sentence can have either positive or negative valence. For example, “looks future my bright very dismal” can be “my future looks very bright” or “my future looks very dismal.” People with distorted thinking patterns are expected to produce more negative sentences.

In some studies, participants are asked to unscramble the sentences while remembering a six-digit number (cognitive load). Because remembering the number is effortful, it reduces the cognitive resources available for distracting attention from unwanted thoughts. It has been hypothesized that people who are attempting to suppress negative thoughts will find it more difficult to do so in the cognitive load condition and will create more negative sentences under cognitive load than in the no-load condition (Wenzlaff & Bates, 1998).

1.4. Research using the Scrambled Sentences Test

Several studies have shown that people with mood disorders create more negative sentences than healthy controls (Miklowitz, Alatiq, Geddes, Goodwin, & Williams, 2010; Wenzlaff & Bates, 1998), and the proportion of negative sentences created is related to self-reported dysfunctional attitudes (Rude, Durham-Fowler, Baum, Rooney, & Maestas, 2010) and self-reported thought suppression (Miklowitz et al., 2010). In longitudinal studies, SST scores predict depressive symptoms at follow-up periods up to 30 months, and the load condition is a consistently stronger predictor of future depression than the no-load condition (Rude, Valdez, Odom, & Ebrahimi, 2003; Rude, Wenzlaff, Gibbs, Vane, & Whitney, 2002; Rude et al., 2010). People with mood disorders currently in remission create significantly more negative sentences under the load than the no-load condition, suggesting that they may be attempting to suppress depressive thoughts and that the cognitive load disrupts these attempts (Wenzlaff & Bates, 1998).

1.5. Current study

A recent review of experiential avoidance in BPD (Chapman, Dixon-Gordon, & Walters, 2011) noted that increased use of laboratory tasks would strengthen research on experiential avoidance processes such as thought suppression. Although substantial research links thought suppression and BPD, studies have relied heavily on self-report measures. Performance-based tasks that assess cognitive processing may provide more accurate information. Although previous studies have used the SST primarily in the context of depression, the SST may also be useful in the study of BPD. Thought suppression is associated with both disorders, and the cognitive distortions typical of depression, such as beliefs that one is weak, helpless, vulnerable, unlovable, and unworthy, are similar to those characteristic of BPD. The purpose of the current study was to extend previous findings on the SST to the study of BPD features. Using methods described later, we modified the SST to include BPD-specific content. Two hypotheses were tested to determine whether SST scores are related in expected ways to severity of BPD features:

Hypothesis 1. The tendency to create negatively valenced sentences on the SST (with and without cognitive load) will be correlated with self-reports of the severity of BPD features, BPD-specific cognitive distortions, and the tendency to engage in thought suppression. Consistent with findings in depression, the cognitive load condition of the SST will be more strongly associated with these variables than will the no-load condition.

Hypothesis 2. If the SST load score is a stronger predictor of BPD features than the no-load score, this will suggest that the cognitive load is important, presumably because it disrupts habitual attempts to suppress distorted thoughts typical of BPD. It was expected that the relationship between the SST load and BPD features will be statistically accounted for by self-reported thought suppression.

2. Method

2.1. Participants

The initial sample included 194 undergraduate psychology students at a large university. Following data screening procedures, a sample of 181 (76% Caucasian, 63% female) was used for analyses. Participants ranged in age from 18 to 24, with a mean age of 18.92 (SD = 1.13). All received course credit for participation.

Previous research has shown that clinically significant BPD features occur in undergraduate samples (Trull, 1995, 2001). Students with scores over 37 ($T > 70$) on the Personality Assessment Inventory—Borderline Features Scale (PAI-BOR; Morey, 1991) demonstrate clinically significant BPD features and maladjustment similar to clinical populations. Using a student sample in the present study allowed us to examine variables of interest across a continuous, wide range of BPD features, as opposed to solely the extremes found in clinical samples. Recruitment procedures were designed to insure adequate representation of the upper end of the distribution of BPD features within this type of sample; while all students in introductory psychology classes were allowed to sign up for the study via an online system (no exclusion criteria), individuals scoring over 37 on a previous administration of the PAI-BOR in a mass screening session were contacted via e-mail and specifically invited to participate in the study. In the final sample of 181, 19% of participants reported clinically significant BPD symptom severity ($T \geq 70$).

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