

Investigating the Moderating Role of Self-Knowledge Processes and self-control in the Relationship between Childhood Traumas and the Severity of Borderline Personality Traits

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Abstract

Background: Previous research shows that neglecting the basic needs of the child or physical and sexual abuse during the first years of life has a significant relationship with developing of BPD symptoms. So, the present study aimed to investigate the moderating role of self-knowledge processes and self-control in the relationship between childhood traumas and the severity of borderline personality traits. **Materials & Method:** Based on convenience sampling method 109 individuals were assessed by Child Abuse and Trauma Scale (Sanders & Becker-Lausen), Integrative Self-Knowledge Scale (Ghorbani, Watson & Hargis), Mindfulness Scale (Brown & Ryan), Self-Control Scale (Tangney, Baumeister & Boone), and the Borderline Personality Scale (Claridge & Broks). **Result:** The hierarchical regressions showed that mindfulness, self-knowledge and self-control can predict the severity of borderline personality traits directly ($p < 0.01$); however, they did not play the moderating role ($p > 0.01$). **Conclusion:** Self-regulation processes do not moderate the severity of traumas and borderline personality traits and they merely act as predictor variables.

Keywords: Self-knowledge processes; Childhood trauma; Borderline personality traits; Mindfulness; Self-control

Introduction

Borderline personality disorder (BPD) is a serious mental disorder which estimated to occur in 10% of outpatients and 15% to 20% of hospitalized patients diagnosed by borderline personality disorder (Diagnostic and statistical manual-text revision (DSM-IV-TR, 2000). Neglecting the basic needs of a child or physical and sexual abuse during the first years of life has a significant relationship with developing of BPD symptoms.^[1-5] Zanarini & Frankenburg^[6] reported the prevalence of physical and sexual abuse in patients with BPD before the age of 18, 91% and 92%, respectively.

According to positive psychology, it is very important to prevent personality disorders^[7] especially for the people who are most susceptible to develop mental disorders, such as those who have been hurt or abused. The mechanism of such prevention is possible through reinforcing one's strengths and internal skills.^[7,8] Therefore, it is essential to identify and reinforce the strengths in people at risk. On the other hand, the human organism tends to maintain its balance and growth after experiencing traumas or abuses by applying its own strengths to return to the previous standards (assimilation) or to create new standards based on the event (accommodation) in various intellectual, emotional and behavioral areas.^[7,9] In other words, the system is equipped with self-regulation processes.^[10]

Self-regulation processes include a range of skills and have different components in various researches. In the present study, it is assumed that those components of self-regulation processes (mindfulness and self-knowledge) and self-control, return an organism to its previous developmental path.^[10] In addition, integrative self-knowledge is

defined as an adaptive and empowering attempt of the self to understand its experiences across time to achieve desired outcomes.^[11]

According to Brown, Ryan and Creswell^[12] mindfulness is a receptive attention to and awareness of present events and experience. In receptive attention, every thought, feeling, and physical sensation that arouses from attention to a stimulus will be the center of attention. Moreover, Mindfulness is associated with decreasing anxiety and depression and increasing well-being.^[13]

As well, self-control refers to the ability to postpone present pleasures to achieve an organism's future objective.^[12] Empirical evidence suggests that individuals with high self-control capabilities obtain better results in different areas of life^[14] and enjoy more compatible mental health.^[15] In addition, self-knowledge refers to awareness of inner states and is associated with mental health.^[16]

Previous studies have demonstrated the association between self-regulation and its components, including self-knowledge (mindfulness and integrative self-knowledge) and self-control processes with mental health and investigated the effects of self-knowledge and self-control

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How to Cite this Article: Goodarzi N, et al. Investigating the Moderating Role of Self-Knowledge Processes and self-control in the Relationship between Childhood Traumas and the Severity of Borderline Personality Traits. *Ann Med Health Sci Res.* 2018;8: 257-261

separately; while these two factors have interactions and their effects cannot be examined separately. Alberts, Martijn, and De Vries^[17] have also shown that increasing individuals' self-knowledge will increase their self-control capacity.

So far, no study has investigated the effect of pre-equipment of people with these skills or equipping them after the incidence of trauma to reduce the borderline personality traits; however, due to the following reasons, it can be assumed that these two skills can minimize such effect in the form of some capabilities: first, due to the close relationship between self-knowledge and self-control in self-regulation processes;^[17,18] second, due to their separate relationships with mental health and compatibility,^[15,16] third, due to the possible relationships between the two skills and experiencing trauma and abuse.^[19] Also, the presence of severe deficits in self-regulating processes (self-knowledge and self-control) can be observed in all symptoms of borderline personality disorder including impulsivity, suicide attempts, emotional instability, severe anger and disproportion and difficulty in controlling, identity impairment and self-control instability.^[4] Likewise, Zanarini, and Frankenburg^[6] showed that 90% of patients with BPD had instability and emotional dysregulation, in comparison to 30% in patients with other personality disorders. In addition, based on some evidence deficits in the ability of empathy and mentalization in patients with BPD is so high and comparable to autism.^[20] In fact, impairments in self-regulating processes are the key factors in the emergence and maintenance of borderline personality traits.^[21] Therefore, the two skills of self-knowledge (mindfulness and integrated self-knowledge) and self-control; as components of self-regulation processes can act as buffers to reduce and modify the relationship between childhood traumas and the severity of borderline personality traits which were the subjects of present study.

Materials and Methods

The sample of study included 109 males (22 ± 3.78) who selected in the city of Tehran and at Aja University of Medical Sciences by simple random sampling method. They completed all questionnaires within a week. Also, participation in this study was voluntary, and all responses were anonymous.

Tools

Borderline Personality Scale (STB): This scale has been developed to measure borderline personality patterns in nonclinical research. It includes 18 items which are answered with either 'yes' or 'no'. This scale involves three factors: hopelessness, impulsivity and stress related dissociative and paranoid symptoms. Jackson & Claridge^[22] reported a test-retest reliability coefficient of 0.61 for STB. Rawlings, Claridge & Freeman^[23] also reported a Cronbach's alpha coefficients of 80% for STB. This scale is made on the basis of the third edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM-III). But during the normalization and revision for Iranian society, 6 items had been added to evaluate dissociative and paranoid symptoms based on DSM-IV-TR. So, the final Persian version contains 20 questions;^[24] which was used in present study. Total reliability coefficient of scale is 0.84 and the subscale of hopelessness, impulsivity and stress related dissociative and paranoid symptoms subscales were found to be 0.52, 0/73 and 0/50 respectively. Also total Cronbach's alpha coefficients is 0/77 and stress related dissociative and paranoid symptoms subscales were found to be 0.64, 0/58 and 0/57 respectively.^[24]

Child Abuse and Trauma Scale (CATS): This scale consists of 38 items, scored from 0 to 4, based on a 5-point Likert scale which was designed by Sanders and Becker-Lausen.^[25] This test involves three factors: negative home atmosphere (which includes abandonment and neglect) ($\alpha=0.86$), sexual abuse ($\alpha=0.76$) and punishment ($\alpha=0.63$). Its test-retest reliability coefficient is acceptable and its internal

consistency reported 0.90. In addition, its scores are significantly correlated with the results of Dissociative Experiences Scale.^[25]

Integrative Self-Knowledge Scale (ISK): This scale consists of 12 items, scored based on a 5-point Likert scale (from mostly incorrect to mostly correct) which is developed by Ghorbani, Watson & Hargis.^[11] Cronbach's alpha coefficients were obtained 0.88, 0.81 and 0.81 during recruiting three Iranian samples.^[11] The validity and reliability of this scale have been confirmed in several studies.^[26]

Mindfulness Attention Awareness Scale (MAAS): This scale includes 12 items which is scored based on a 5-point Likert scale (1: almost never and 5: almost always).^[27] It has a good reliability and its Cronbach's alpha coefficients were reported to be between 0.82 and 0.87 in the study of seven samples Its validity is also acceptable and has a high correlation with a number of mental health variables.^[27] This scale has been implemented in Iran and its Cronbach's alpha coefficient obtained 0.82 on average. It has positive relationships with the relevant variables including self-knowledge and mental health.^[13]

Self-Control Scale: It is developed by Tangney, Baumeister & Boone and consists of 36 items which is scored based on a 5-point Likert scale (1: never and 5: very much) (5). Its internal consistency is 89% and its test-retest reliability coefficient is 89%.^[14]

Results

Hierarchical regression method was used to investigate the moderating role of mindfulness, integrative self-knowledge and self-control in the relationship between childhood traumas and the severity of borderline personality traits. Initially, descriptive indexes of predictor and criterion variables were reported. Data distribution indices indicate that data had a relatively normal distribution [Table 1].

Based on the results, increasing self-knowledge processes would decrease the severity of borderline personality traits. In addition, Childhood traumas had a significant positive relationship with the severity of borderline personality traits. Investigating the relationship between predictor variables also showed that self-knowledge had a significant relationship with mindfulness which violates the assumption of non-correlation between the predictor variables. Other relationships are poor but significant [Tables 2-4]. Also, by applying hierarchical regressions, the following major findings emerged.

Table 1: Descriptive indicators of the severity of borderline personality traits, childhood traumas, mindfulness self-knowledge and self-control.

Variable	Mean	SD	Skewness	Kurtosis
The severity of borderline personality traits	29.10	3.31	1.17	1.29
Childhood traumas	38.45	15.47	0.59	0.43
Mindfulness	59.30	10.98	-1.06	1.28
Self-knowledge	39.32	9.87	-0.60	0.44
Self-control	40.01	7.98	0.07	-0.20

Table 2: The correlation matrix between the severity of borderline personality traits with childhood traumas, mindfulness, self-knowledge and self-control.

No.	Variable	1	2	3	4
1	The severity of borderline personality traits				
2	Childhood traumas	0.325 **			
3	Mindfulness	-0.547 **	-0.356 **		
4	Self-knowledge	-0.445 **	-0.17	0.624**	
5	Self-control	-0.202 *	-0.249**	0.295**	0.461**
		P <0/1 *			
		P <0/5 **			

The moderating role of mindfulness

According to the hierarchical regression results and as shown in Tables 3-5, in the first step, childhood traumas predicted 11% of the variance of the severity of borderline personality traits. In the second step, mindfulness individually predicted 21% of the variance and both together predicted 31% of the variance of the severity of borderline personality traits. In the third step, the predictive share did not change and the interactive effect was not significant and had no moderating role, but it was an independent predictor [Table 3].

The moderating role of self-knowledge

Table 6 displays that childhood traumas predicted 11% of the variance of the severity of borderline personality traits, while self-knowledge individually predicted 16% of the variance and both together predicted 27% of the variance of the severity of borderline personality traits. As well, the predictive share changed only 2% which was fairly negligible. And was not statistically significant; meaning that self-knowledge had no moderating role, but it was an independent predictor [Table 4].

The moderating role of self-control

As shown in table, 11% of the variance of the severity of borderline personality traits could be predicted by childhood traumas and also self-control individually predicted 2% of the variance though r predicted 13% of the variance of the severity of borderline personality

traits. Additionally, the predictive share changed only 3% which indicated its negligible moderating role. Meaning that self-control had no moderating role, but it was an independent predictor [Table 5].

The moderating role of self-knowledge processes

In this section, childhood traumas, mindfulness, self-knowledge, and self-control and finally the interactive effects of these three variables with childhood traumas were entered into the regression equation, respectively. According to the results, in the first step, childhood traumas predicted 11% of the variance of the severity of borderline personality traits. Also, mindfulness, self-knowledge and self-control, predicted 22% of the variance and both together predicted 33% of the variance of the severity of borderline personality traits. In the third step, the predictive share did not change and the interactive effect was not significant.

It seems because of strong relationship between mindfulness and the severity of borderline personality traits, mindfulness was a better predictor compared to self-knowledge. As shown in the correlation matrix in the first section, self-control had a poor relationship with the severity of borderline personality traits, therefore, it was a weaker predictor and in the second step and with the arrival of the two variables of self-knowledge and mindfulness, self-control could no more predict the severity of borderline traits. Reviewing the third step also suggested that none of the variables obtained by multiplying self-knowledge processes by childhood trauma was significant; meaning that they have no moderating role [Table 6].

Table 3: The regression coefficients of childhood traumas and mindfulness and their moderating effects.

Step	Variables	B	se	β	T	P	R	Changed R2	F
1	Fixed value	26.43	0.81		32.60	0.00	0.33	0.11	12.63
	Trauma	0.07	0.02	0.32	3.55	0.00			
2	Fixed value	36.71	1.92		19.11	0.00	0.57	0.21	24.81
	Traumas	0.03	0.02	0.15	1.74	0.09			
	Mindfulness	-0.15	0.03	-0.49	-5.76	0.00			
3	Fixed value	35.35	5.31		6.66	0.00	0.57	0.00	16.42
	Traumas	0.06	0.11	0.29	0.56	0.57			
	Mindfulness	-0.13	0.09	-0.42	-1.49	0.14			
	Trauma × Mindfulness	0.00	0.00	-0.13	-0.27	0.78			

Table 4: The regression coefficients of childhood traumas and self-knowledge and their moderating effects.

Step	Variables	B	se	β	T	P	R	Changed R2	F
1	Fixed value	26.43	0.81		32.60	0.00	0.33	0.11	12.630
	Trauma	0.07	0.02	0.32	3.55	0.00			
2	Fixed value	32.29	1.44		22.37	0.00	0.51	0.16	18.763
	Traumas	0.05	0.02	0.26	3.02	0.00			
	Self-knowledge	-0.13	0.03	-0.40	-4.73	0.00			
3	Fixed value	27.56	3.39		8.12	0.00	0.53	0.02	13.455
	Traumas	0.16	0.07	0.77	2.23	0.03			
	Self-knowledge	-0.02	0.08	-0.05	-0.20	0.84			
	Trauma × Self-knowledge	0.00	0.00	-0.58	-1.54	0.13			

Table 5: The regression coefficients of childhood traumas and self-control and their moderating effects.

Step	Variables	B	Se	β	T	P	R	Changed R2	F
1	Fixed value	26.43	0.81		32.60	0.00	0.33	0.11	12.630
	Trauma	0.07	0.02	0.32	3.55	0.00			
2	Fixed value	32.29	1.44		22.37	0.00	0.51	0.16	7.314
	Traumas	0.05	0.02	0.26	3.02	0.00			
	Self-control	-0.13	0.03	-0.40	-4.73	0.00			
3	Fixed value	27.56	3.39		8.12	0.00	0.53	0.02	7.253
	Traumas	0.16	0.07	0.77	2.23	0.03			
	Self-control	-0.02	0.08	-0.05	-0.20	0.84			
	Trauma × Self-control	-0.001	0.00	-0.58	-1.54	0.13			

Table 6: The regression coefficients of mindfulness, self-knowledge, self-control in predicting the severity of borderline personality traits and their moderating effect along with childhood traumas.

Step	Variable	B	Se	β	T	P	R	Changed R2	F
1	Fixed value	26.43	0.81		32.60	0.00	0.33	0.11	12.630
	Trauma	0.07	0.02	0.32	3.55	0.00			
2	Fixed value	36.36	2.26		16.08	0.00	0.58	0.22	7.314
	Trauma	0.04	0.02	0.17	1.92	0.06			
	Mindfulness	-0.11	0.03	-0.37	-3.47	0.00			
	Self-knowledge	-0.07	0.04	-0.20	-1.83	0.07			
	Self-control	0.02	0.04	0.04	0.47	0.64			
	Fixed value	31.94	5.75		5.56	0.00	0.58	0.001	7.253
	Trauma	0.16	0.13	0.77	1.32	0.19			
3	Mindfulness	-0.19	0.10	-0.64	-1.91	0.06			
	Self-knowledge	-0.03	0.09	-0.09	-0.32	0.75			
	Self-control	0.21	0.11	0.51	1.88	0.06			
	Trauma × mindfulness	0.00	0.00	0.49	0.80	0.42			
	Trauma × self-knowledge	0.00	0.00	-0.14	-0.28	0.78			
	Trauma × self-control	-0.01	0.00	-0.99	-1.78	0.08			

Discussion

The present study aimed to investigate the role of self-regulation processes as a moderating variable in the relationship between childhood trauma and borderline personality traits, though the results indicated that self-knowledge processes, and self-control have no moderating role in the relationship between the history of childhood trauma and the severity of borderline personality traits. However, self-knowledge processes, self-control, and childhood traumas directly predicted the severity of borderline personality traits. This finding is consistent with the results of several studies which have reported correlation and even causative relationship between childhood traumas and formation of BPD.^[1,2,28-30] Evidence suggest that generally people with little self-knowledge have poor insight about their emotions, thoughts, and psychological processes,^[31] and also low levels of self-control which lead to conduct several damaging impulsive behaviors during their life.^[32-34] In fact, childhood and adolescence traumas are not the only causes of this disorder as some studies have highlighted the role of other factors such as emotional dysregulation, social support and negative emotions in its development.^[28,35] On the other hand, Elzy^[28] indicated that some people who have faced numerous traumatic experiences in their childhood have not developed borderline personality disorder and also 30-60% of patients with borderline personality disorder have not reported any kind of child abuse experience. Although, no study has investigated the moderating role of self-knowledge processes and self-control in the relationship between childhood trauma and borderline personality disorder yet. In addition, the lack of examining the type, severity and vulnerable age of childhood trauma, as the limitations of the study, could provide more explanations and shed light on the role of self-knowledge processes, and self-control in the relationship between childhood trauma and also the severity of borderline personality traits. Since, the results might be depending on the type of damage including acute trauma, complex trauma and chronic trauma,^[36] and its occurrence,^[31] as well as its quality, which will influence on client's affects, cognitions, behaviors, self-concept, and worldview in different ways. For instance, in an early chronic trauma (before the age of 5), the person's character will become fragile and as a result, ego-capacity for observing psychological processes and self-control will be greatly reduced. So, people will lose their abilities to regulate their emotions properly and as soon as the emotions arouses, they will experience anxiety that prevents them to feel their emotions in the natural path.^[37] In this regard, some evidence shows that the difference between the type and severity of a damage infected by the BPD people compared with other disorders.^[29,37] Moreover, when parents usually do not reflect the feelings and impulses of their children,^[38] the mental capacity of the child for experiencing and controlling their emotions properly will

not be increased and the capacity of self-regulation will be very low. Thus, it is not necessarily possible to find any meaningful relationship between any kinds of trauma with the symptoms of BPD.

By taking into account these complexities, we should definitely examine the role of self-knowledge processes, and self-control as moderator variables in order to achieve more accurate results. It may be considered as a possible reason to explain the significance of self-regulation processes not only as a moderator, but also an independent variable. Unfortunately, due to the lack of a standardized questionnaire in Iran to assess the age, severity, and type of impairment (chronic or acute) separately, it was not possible for authors to examine those components.

The authors could not find any questionnaire on the emotional reflection, facilitation and regulation of emotional experiences by the main caregivers which is a major variable in the development of self-regulation processes in children. Thus, to design a new or normalized scale to study the relationship between childhood traumas, self-regulation skills and the severity of BPD symptoms and other disorders further studies should be conducted.

Conflict of Interest

The authors disclose that they have no conflicts of interest.

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