

## **THE SOCIAL-COGNITIVE BASIS OF BORDERLINE AND ANTISOCIAL PERSONALITY DISORDER: INTRODUCTION**

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In recent years there has been an explosion of research examining the social-cognitive correlates of personality disorders, in particular Borderline Personality Disorder (BPD) and Antisocial Personality Disorder (ASPD) or psychopathy. This research is interdisciplinary and utilizes methodologies and constructs from clinical psychology, social psychology, cognitive psychology, developmental psychology, cognitive neuroscience, behavioral economics, neuroeconomics, and psychodynamic approaches. Never before has this research been brought together in a single volume.

Against this background, we were fortunate to assemble several leaders in the field of the social-cognitive basis of BPD and ASPD to contribute original empirical articles on the social-cognition of BPD and ASPD or psychopathy across the lifespan. In reviewing the contributions of this group of authors, the variety of social-cognitive constructs and associated experimental probes is staggering, and points not only to the heterogeneity of the umbrella construct of social cognition, but also to the creativity of approaches to probe its components. For instance, in the first paper presented for BPD, Sharp, Ha, Carbone, Kim, Perry, Williams, and Fonagy make use of a theory of mind task utilizing movie clips to demonstrate change in borderline symptoms as a function of change in excessive theory of mind (or hypermentalizing) during inpatient treatment. Related to the idea of hypersensitivity to mental states in BPD, Hagenhoff, Franzen, Gerstner, Koppe, Sammer, Netter, Gallhofer, and Lis used a visual search task which required subjects to detect a face with an incongruent emotional expression within a crowd of neutral faces in the hopes of demonstrating a pronounced anger-superiority-effect in BPD patients. The tendency for a bias for negative valence in BPD was also investigated by Sieswerda, Barnow, Verheul, and Arntz, who examined negativistic and dichotomous thinking, and splitting in borderline patients through the use of movie clips against the broader theoretical background of a schema approach to personality disorder. Also in the cognitive-behavioral therapy

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tradition, in the first paper to focus on ASPD, Lobbestael, Cima, and Arntz used social vignettes to demonstrate a hostile attribution bias specifically related to reactive aggression in patients with ASPD. Next, Domes, Hollerbach, Vohs, Mokros, and Habermeyer used a mixture of experimental tasks and questionnaire-based measures of cognitive and emotional empathy to investigate the specificity of the latter for psychopathy. The last two papers covering APSD/psychopathy diverge from more traditional approaches discussed above, to use reward-related paradigms to investigate the social-cognitive basis of psychopathy in youth. Moul and Dadds reported data on a novel learning task designed to operationalize a learning style associated with psychopathic traits that encode the general valence, and neglect the specific-features of information. Finally, White, Brislin, Meffert, Sinclair, and Blair used an fMRI version of the ultimatum game to examine fairness as it relates to psychopathic traits.

Sabine Herpertz provides a Commentary of the above papers and of their general implications regarding the social-cognitive basis of BPD and ASPD. Here, we simply highlight that the research assembled here suggests both deficits and distortions in social-cognitive functioning associated with BPD and ASPD. Moreover, especially in the work of Blair and Moul, the importance of other networks (e.g., reward processing) affecting interpersonal functioning is highlighted. Whether the study of social cognition is conducted through the application of traditional social-cognitive tasks such as theory of mind tasks or the more recent use of reward-related neuroeconomic tasks, the area of social cognition in personality disorders is important for several reasons. First, the experimental psychopathology foundation of personality disorders currently lags behind Axis I disorders like depression and anxiety. Second, given the interpersonal nature of personality disorders, research examining social-cognitive correlates is particularly relevant to the empirical understanding of these disorders. This is made even more relevant by current DSM-V proposals to reformulate personality disorders as primarily disorders of self and interpersonal interaction. Third, social-cognitive factors provide promising candidate endophenotypes that may help clarify the basis of the heritability associated with personality disorders and this may, in turn, inform treatment. While much empirical work has focused on emotional reactivity and impulsivity as endophenotypes associated with personality disorders, it is only recently that social cognition as etiological factor and mechanism of change has received empirical attention. We hope that through this special issue, we have made a contribution in moving forward this important research (and clinical) agenda.