

# Self-defining memories and self-concept clarity: A comparative study of depressed patients, bipolar patients and healthy subjects

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## BACKGROUND

Depressed and bipolar patients also suffer from disruptions of the self-concept clarity (SCC) which is the degree of certainty and confidence concerning self-descriptions (Campbell, 1996; Singer, Blagov, Berry & Oost, 2012).

Because SDMs are crystallisations of the links between memory and identity (Lardi & Van der Linden, 2012), SDMs might help to have a high SCC.

↳ Aim of this study: (3) To assess the relationship between SDMs and SCC.

## HYPOTHESES

Compared to healthy subjects, depressed and bipolar patients will:  
 Recall less specific and meaning-making SDMs  
 Report more negative SDMs  
 Report more contamination than redemption  
 Report lower SCC

Self-defining memories (SDMs) are... (Blagov & Singer, 2004)

- Vivid, emotionally intense and well-rehearsed autobiographical memories;
- Reflections of the central goals, values and conflicts of an individual's life;
- Integrated memories related to a meaning-making (i.e., a learned lesson about oneself, others or the world).

Depressed and bipolar patients present disturbances of autobiographical memory (AM) (Blagov & Singer, 2004):

- **Overgeneralisation bias:** recall of less specific memories than general ones
- **Mood congruence bias:** recall of less positive memories than negative ones

Because SDMs have not been studied a lot since yet in these two disorders...

- ↳ Aims of this study:
- (1) Assess the presence of AM disturbances in the recall of SDMs
  - (2) Compare SDMs' characteristics among depressed and bipolar patients

## METHOD

### EXPERIMENTAL DESIGN

1(TIME)\*3(GROUP: depressed patients, bipolar patients and healthy subjects) design is used

Recall of 6 SDMs according to these instructions:

- SDMs should date from last than a year and be clear and familiar
- SDMs help to understand who you are
- SDMs can be positive, neutral or negative
- SDMs are well-rehearsed and as familiar as a picture

### SAMPLE

	Depressed patients (DP) N = 17	Bipolar patients (BP) N = 16	Healthy subjects (HS) N = 19	
Sex (♀/♂)	8/9	7/9	10/9	
Age	51,24 (10,60)	55,56 (9,99)	48,21 (13,24)	p > 0,05
	M (SD)	M (SD)	M (SD)	
Number of depressive episodes	2 (1,31)	5,22 (5,67)	/	
Number of manic episodes	/	5,18 (5,88)	/	

### SDMs ASSESSMENT

- Specificity
  - Meaning-making
  - Contain
  - Recalled and current emotional valence
- ↳ Redemption: negative *past* valence - - > positive or neutral *actual* valence  
 ↳ Contamination: positive *past* valence - - > negative *actual* valence  
 ↳ Neutral sequence: identical *past* and *actual* valences

### MOOD & SELF ASSESSMENT

- Depression severity (Beck Depression Inventory, BDI-II)
- Mania (Young Mania Rating Scale, YMRS)
- Self-concept clarity (Self-concept clarity scale, SCCS)

### STATISTICAL ANALYSES

Descriptive, correlational analyses & ANOVA measures

## RESULTS

### MOOD & SELF

	DP M (SD)	BP M (SD)	HS M (SD)	GROUP F(d1=2)	p
BDI-II	25,47 (15,06)	15,13 (19,93)	3,79 (6,18)	13,53(2)	< 0,01
YMRS	/	6,25 (11,40)	/	/	/
ECCS	37,35 (10,67)	38,13 (10,22)	50,63 (5,12)	12,41	< 0,01

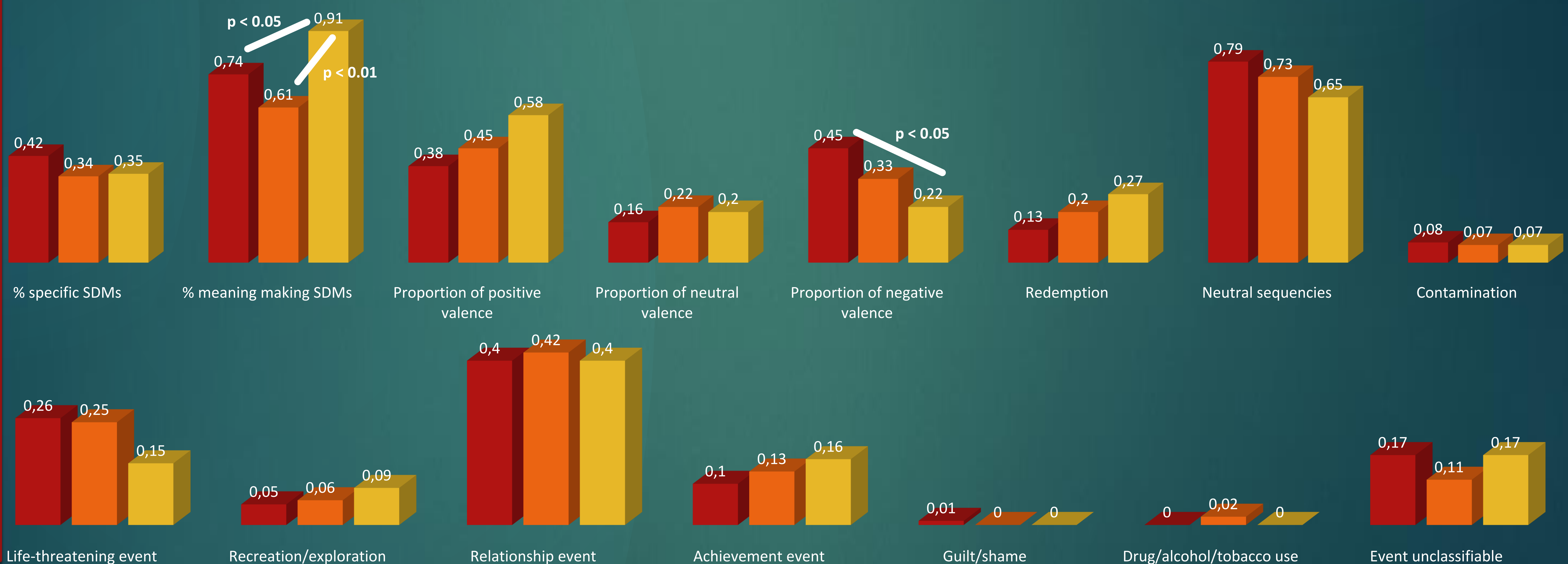
### SDMS & SELF

Correlational analyses were conducted on the whole sample (N = 52).

	Meaning making	Specificity	Redemption	Neutral sequences	Contamination	Valence		
						Negative	Neutral	Positive
SCC	r = 0,41 p < 0,01	r = -0,04 p = 0,76	r = 0,26 p = 0,06	r = -0,29 p < 0,05	r = 0,10 p = 0,46	r = -0,59 p < 0,01	r = 0,05 p = 0,72	r = 0,55 p < 0,01

### SDMS CHARACTERISTICS

■ Depressed patients ■ Bipolar patients ■ Healthy subjects



## DISCUSSION & CONCLUSION

Our results support partially our hypotheses. In accordance with our hypotheses,

- ✓ DP and BP report a lower self-concept clarity than HS.
- ✓ DP and BP recall less meaning-making SDMs than HS.
- ✓ DP recall more negative SDMs than HS.

↳ This confirms results of previous study (Werneir-Seidler & Moulds, 2012) and is in line with the mood congruence bias.

Contrary to our hypotheses,

- DP and BP do not recall less specific SDMs than HS.  
↳ This does not confirm the presence of the overgeneralization bias in SDMs.
- DP and BP do not present more contamination than HS.  
↳ This does not confirm results of previous study (Harkness, 2011).
- BP do not recall more negative SDMs than HS.

Memories mainly concern relationships among the three groups. Despite no difference between groups, DP and BP also recall life-threatening events which seems to correspond to the negative emotional valence of their SDMs.

As predicted, DP and BP present a lower sense of self throughout a lower SCC than HS' one. It seems that certain SDMs characteristics might help to maintain SCC (meaning making, redemption and positive emotional valence).

➔ These results already highlight clinical implications of working on recalling positive SDMs and on recalling SDMs which contain meaning making and present redemption sequences for the SCC.

⚠ The limited samples' size does not enable us to have an adequate statistical power: similar studies include at least 30 subjects within each group → Analyses should be replicated in larger samples.