



Childhood Trauma and Social Cognition in Participants with Bipolar Disorder

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DESCRIPTION

Individuals with Bipolar Disorder (BD) frequently present with difficulties in Social Cognition, which is how individuals use information in social contexts to explain and predict people's behavior. Social Cognition is presumed to develop within the context of caregiving interactions experienced in early childhood, facilitating the formation of attachment styles which can influence psychological functioning throughout the lifespan. The two dimensions of Anxiety and Avoidance have been used to describe attachment styles, with four groups coming from various combinations of the two dimensions:

- Secure (low anxiety-low avoidance)
- Fearful (high anxiety-high avoidance)
- Preoccupied (high anxiety-low avoidance)
- Dismissing (low anxiety-high avoidance)

From an attachment perspective, childhood traumatic experiences (e.g., abuse, neglect) by caregivers can lead to insecure attachments (i.e., fearful, worried, disengaged), which may have Bipolar Disorder detrimental effects on the subsequent development of Social Cognition. However, Social Cognition impairments in individuals with have been commonly explained using genetics, rather than developmental models. In order to test this environmental experience hypothesis, the current study explores the potential moderating role of attachment in the relationship between childhood traumatic experiences and Social Cognition in individuals with bipolar disorder.

Bipolar disorder is a chronic mood disorder characterized by the cyclic presence of extreme emotions that alternate between depression and mania BD impacts the individual's quality of life and constitutes a significant risk factor for suicide. According to the World Health Organization, bipolar disorder affects 60 million people worldwide, and it is considered the sixth cause of disease burden in the 15-44 year age band of the population. There is extensive research that identifies risk factors for the start of Bipolar Disorder. Traumatic childhood experiences, which may impact the start of the illness, have been given a significant

significance in this context. Furthermore, there is evidence that this demographic has a high prevalence of early traumatic experiences. For example, early traumatic experiences are associated with higher rates of suicide attempts, substance abuse and cognition deficits. In the area of cognition deficit in individuals with, particular attention has been paid to impairments in Social Cognition is involved in the processes related to thinking about ourselves, others and our social interactions.

Social Cognition has been operationalized through expert's agreement, who determined five dimensions: Social perception, social knowledge, attribution bias, theory of mind and emotional processing. Research on Social Cognition in Bipolar Disorder has mainly focused on the theory of mind and emotional processing, noticing alterations of these dimensions during both euthymic and depressive phases. The Social Cognition perspective has provided a fundamental framework for understanding impairments in emotional regulation, emotion recognition and impulsive behavior in the Bipolar Disorder population. These variables have been linked to high-risk behavior and have a detrimental impact on these people's interpersonal connections. Because sufficient emotion perception and theory of mind abilities are crucial for adaptive social interaction, changes in social cognition are important aspects to address in psychosocial studies on Bipolar Disorder. According to preliminary studies, stronger Social Cognition is linked to a lower intensity of depression, a better quality of life, and a better functional outcome in Bipolar Disorder.

Childhood trauma

The Spanish language version of the CTQ-Short Form was used to assess the participant's history of childhood maltreatment. Briefly, this self-reporting instrument comprises 28 items, referring to five subtypes of child abuse:

- Emotional Abuse (EA)
- Physical Abuse (PA)
- Physical Neglect (PN)

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- Emotional Neglect (EN)

This questionnaire has shown adequate psychometric properties in both the general and has been used for various studies in

Bipolar Disorder (BD) populations. The version validated for Chile showed sufficient internal consistency for each subscale with Cronbach's α between 0.66 and 0.94.