

Role of Interpersonal Sensitivity and Cognitive Distortions in the Development of Psychopathologies

Psikopatolojilerin Gelişiminde Kişilerarası Duyarlılık ve Bilişsel Çarpıtmaların Rolü

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ABSTRACT

This study explores the conceptual framework and existing research on the role of interpersonal sensitivity and cognitive distortions in the development of various psychopathologies. To achieve this, a comprehensive review of national and international literature was conducted, including studies, master's theses, and doctoral dissertations. Interpersonal sensitivity, a personality trait associated with challenges in interpersonal relationships, is identified as a risk factor for the onset of psychopathology. It is characterized by heightened awareness of others' feelings and behaviors. Individuals with high interpersonal sensitivity often overemphasize their relationships, amplify problems, and become easily upset by these issues. Misinterpretations and biased evaluations of events, driven by low self-esteem and feelings of inadequacy, lead them to focus on negative self-perceptions. These cognitive distortions, which involve erroneous attributions and biased inferences, perpetuate negative emotional states and psychological difficulties. By addressing these dynamics, this study aims to advance understanding in the field and inform future research and intervention programs.

Keywords: Interpersonal sensitivity, interpersonal relationships, psychopathology, cognitive distortion

ÖZ

Bu çalışma, kişilerarası duyarlılık ve bilişsel çarpıtmaların çeşitli psikopatolojilerin gelişimindeki rolüne dair kavramsal çerçeveyi ve mevcut araştırmaları incelemektedir. Bu amaçla, ulusal ve uluslararası literatür kapsamlı bir şekilde gözden geçirilmiş, çalışmalar, yüksek lisans ve doktora tezleri incelenmiştir. Kişilerarası duyarlılık, kişilerarası ilişkilerde zorluklarla ilişkilendirilen ve psikopatolojinin ortaya çıkmasında bir risk faktörü olarak tanımlanan bir kişilik özelliğidir. Bu özellik, başkalarının duygularına ve davranışlarına karşı artan bir farkındalık ile karakterizedir. Yüksek kişilerarası duyarlılığa sahip bireyler, ilişkilerini aşırı derecede önemser, yaşadıkları sorunları büyütür ve bu sorunlardan kolayca rahatsızlık duyarlar. Düşük benlik saygısı ve yetersizlik duygularından kaynaklanan yanlış yorumlar ve önyargılı değerlendirmeler, onların olumsuz öz-persepsiyonlara odaklanmasına neden olur. Hatalı atıflar ve önyargılı çıkarımlar içeren bu bilişsel çarpıtmalar, olumsuz duygusal durumların ve psikolojik zorlukların devam etmesine yol açar. Bu dinamikleri ele alarak, çalışma alandaki bilgi birikimine katkıda bulunmayı ve gelecekteki araştırmalara ve müdahale programlarına rehberlik etmeyi amaçlamaktadır.

Anahtar sözcükler: Kişilerarası duyarlılık, kişilerarası ilişkiler, psikopatoloji, bilişsel çarpıtma

Introduction

People are born with many needs. In order to these needs to be met and for the person to continue existence, person ensures that both basic needs and psychological needs are met by interacting with others (İmamoğlu 2009). Through this interaction, people perceive the internal processes experienced by others and are affected by these situations, and they also affect others with their internal states (Hall and Bernieri 2001, İmamoğlu 2009, Yıldız and Ekşi 2021). Interpersonal sensitivity, which is defined as the ability to perceive internal and environmental stimuli and interpret verbal or nonverbal cues, is expressed as the ability to judge and respond harmoniously to situations (Hall and Bernieri 2001, Carney and Harrigan 2003). This process begins with the individual's perception by paying attention to the experiences. The perceived situation is processed by distinguishing it from others and interpreted through this information (Hall and Bernieri 2001). Differences in perception and interpretation of situations cause individual differences in interpersonal sensitivity. In the study conducted in clinical samples, it was determined that some individuals had higher interpersonal sensitivity than others with the scale developed (Boyce and Parker 1989, Hall and Bernieri 2001, Aydın and Hiçdurmaz 2016).

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Boyce and Parker (1989), who developed the first scale on this subject, define interpersonal sensitivity as being overly aware and sensitive to the feelings, thoughts and behaviors of others. The tendency to be overly aware of others' emotions and behaviors causes the person to make erroneous interpretations in perceiving and evaluating events (Erözkan 2004, Doğan and Sapmaz 2012). These misinterpretations cause biased inferences and lead to the expectation that they will not be accepted, will be rejected and excluded by others (Doğan and Sapmaz 2012, Aydın and Hiçdurmaz 2016, Çakal and Taştan 2023). Individuals with this expectation make negative evaluations about themselves with low self-esteem. In social environments, they experience intense distress by emphasizing more on the negativities they see in themselves with a sense of inadequacy. They become sensitive to being criticized and rejected by others and receiving feedback from others (Boyce and Parker 1989, Erözkan 2005, Vidyandhi and Sudhir 2009, Doğan and Sapmaz 2012). Individuals who are overly focused on their interpersonal relationships tend to think too much about events that are perceived as ordinary by many people. This intense thinking causes the person to relive past events in an imaginary way with different scenarios, to be unable to get out of the influence of experiences, to perpetuate negative affect, to regret and disappointment (Erözkan 2004, Erözkan 2005, Doğan and Sapmaz 2012). They tend to magnify the problems experienced in relationships, to exhibit easily fragile behaviors in the face of these problems with comments and evaluations within the framework of their own thoughts, and to experience difficulties in solving the problems (Boyce and Parker 1989, Erözkan 2005, Aydın and Hiçdurmaz 2016).

The content of thought is very important in the emergence and process of psychopathology. The aim of this study is to transfer the interpersonal sensitivity, which expresses sensitivity to the behaviors and reactions of others in the lives of individuals, and the cognitive distortions that express the wrong attributions and inferences made in the evaluation of experiences. In this context, the basic characteristics of both concepts, their effects on the individual's life, psychological health and their role on the development of psychopathology are discussed.

Components of Interpersonal Sensitivity

Boyce and Parker (1989) define five factors related to the construct in order to define interpersonal sensitivity in more detail. These factors are; it is expressed as "interpersonal awareness", "need for approval", "separation anxiety", "timidity" and "fragile inner self". The interpersonal awareness dimension is defined as the sensitivity to the effect on others and the feedback they will receive by focusing excessively on the states and reactions of others. The other dimension, the need for approval, is expressed as the desire to be approved and accepted by others, and to exhibit harmonious behaviors by avoiding criticism and rejection. Another dimension associated with early life is separation anxiety. The separation anxiety dimension refers to individuals worry that they will experience separation or abandonment in their relationships. Another dimension is timidity. This dimension is defined as avoiding sociable attitudes by standing back in social environments, hiding their characteristics that they think will not be accepted and exhibiting introverted behaviors. The last dimension, fragile inner self, is defined as low self-esteem and determining one's self worth according to others. Subsequent studies suggest the use of a three-factor structure due to the lack of validation of this five factor structure (Harb et al. 2002, Doğan and Sapmaz 2012, Aydın and Hiçdurmaz, 2016, Çakal and Taştan 2023).

Harb et al. (2002) define three factors: "interpersonal worry and dependency", "low self-esteem" and "unassertive interpersonal behavior". Interpersonal worry and dependency is the dimension that expresses the belief that individuals should be anxious in social environments, think that they will be misperceived and misinterpreted by others and receive negative feedback, and that they should comply with the wishes of others in order not to be rejected by others. Low self-esteem dimension is defined as the belief that inadequacy is in the foreground, that they will not be valued in their relationships due to low self-esteem, and that they will be evaluated negatively. Unassertive interpersonal behavior dimension is defined as the inability to express oneself, feelings and thoughts in social relationships, being uncomfortable being in the public eye in social environments, avoiding assertive expressions and having problems in revealing one's competence (Harb et al. 2002, Bulut 2021). The Turkish validity and reliability study of the interpersonal sensitivity scale was conducted by Doğan and Sapmaz (2012) and this three-dimensional structure was adopted.

Interpersonal Sensitivity and Psychopathology

Depression

Individuals with high interpersonal sensitivity tend to focus excessively on the emotions and behaviors of the

people they interact with (Xu et al. 2022). This excessive focus helps the individual to fulfill their need for approval and to feel safe by being accepted. For this reason, they make inferences by taking into account all kinds of clues about the emotions and behaviors of others (Bulut 2021). Misinterpretation of inferences causes the individual to attribute all negativity to themselves or to internalize it more than it is. This situation causes the individual to have problems in interpersonal relationships and have difficulty in coping with problems (Liu et al. 2024).

Individuals with high interpersonal sensitivity are more affected by problems in relationships and have a higher risk of being exposed to interpersonal stress. Intense stress experience is a risk factor for depression (Xu et al. 2022). It was also stated that interpersonal sensitivity predicts depression and high sensitivity is a risk factor for depression (Çakal and Taştan 2023). Attributing the results of negative evaluations to one's own self causes feelings of worthlessness. In addition, the individual's difficulty in solving problems in interpersonal relationships leads to a sense of inadequacy (Erözkan 2005). A study has shown that people with high interpersonal sensitivity are more sensitive to negative emotions and are more likely to experience negative mood in the future (Liu et al. 2024). In addition, the presence of negative feelings towards one's self leads to avoidance of interaction with the environment. The person's avoidance of establishing relationships leads to a decrease in social support and further isolation (Kring and Johnson 2019). Studies have found that interpersonal sensitivity is associated with depressive symptoms (Xu et al. 2022, Liu et al. 2024).

Anxiety Disorders

Interpersonal sensitivity is a personality trait associated with social anxiety disorder as well as depression (Mohammadian et al. 2018). Individuals with high interpersonal sensitivity feel threatened and vulnerable to feedback from others (Song et al. 2024). This situation causes them to experience intense anxiety that they will lose control in social relationships, be criticized or rejected (Vidyanidhi and Sudhir 2009). They also experience intense feelings of shame that they will be evaluated by others and do not fully open themselves. They pay attention to all kinds of stimuli that may pose a threat to them in the social environment (Lin et al. 2021). People react in two ways to minimize criticism and rejection according to their environment. One of these is to avoid the situation where one will be criticized or rejected. In this way, the person removes themselves from the situation where they do not feel safe and think that it will cause unrest (Erözkan 2004, Doğan and Sapmaz 2012). In this way, they feel that they are in control and that there is no threat. The other reaction is to exhibit adaptive behaviors in situations where avoidance is not possible. The purpose of these behaviors is to try to minimize negative perception, criticism and rejection by others. For this reason, they exhibit behaviors that conform to expectations and are acceptable to others (Doğan and Sapmaz 2012). Both reactions cause the person to feel constantly on guard and to expect that a threat will occur. These repetitive behaviors cause the person to experience constant anxiety (Boyce and Parker 1989, Aydınli 2024). A study concluded that individuals with high interpersonal sensitivity exhibit more fear and avoidance behaviors (Mohammadian et al. 2018). Harb et al. (2002) found a relationship between social anxiety and interpersonal sensitivity. Zhiqi et al. (2019) came to a similar conclusion and found a positive relationship between social anxiety and interpersonal sensitivity.

Separation anxiety, which Boyce and Parker (1989) defined as one of the sub-dimensions of the interpersonal sensitivity scale, also has an important role in interpersonal sensitivity. Bowlby mentioned that the lack of secure attachment with the caregiver in the early period affects relationships in the following years (Otani et al. 2014, Tunç and Bulut 2024). This situation causes the person to have difficulty in starting and maintaining new relationships. Individuals who have early anxious attachment adopt negative thoughts about themselves while seeing the other party positively in their relationships (Tunç and Bulut 2024). These people are sensitive to all kinds of threats in their relationships and make intense efforts to prevent separation (Aydınli 2024). When any problem occurs in this relationship, which is maintained with intense dependency, the person feels vulnerable and helpless (Boyce and Parker 1989). It is stated that being sensitive to the feedback of others, which is one of the characteristics of interpersonal sensitivity, is related to the foundations of the relationship established with the caregiver in the early period (Tunç and Bulut 2024).

Borderline Personality Disorder

Borderline Personality Disorder (BPD), which is defined as impulsivity and inconsistency in interpersonal relationships and mood, has some features overlapping with interpersonal sensitivity (Hallquist 2018, Kring and Johnson 2019). Studies have shown that individuals with BPD are sensitive in interpersonal relationships, pay attention to the stimuli in the environment and react negatively to the facial expressions of others (Stanley and Siever 2010). In another study, BPD symptoms were found to be associated with interpersonal sensitivity (Stepp

et al. 2012). Considering that genetic factors are 60% effective in BPD (Kring and Johnson 2019), the role of interpersonal sensitivity and environmental factors in the disorder is an issue that needs to be investigated more extensively.

Paranoid-Schizoid-Schizotypal Personality Disorders

Interpersonal sensitivity is a prominent personality trait in disorders in cluster A of personality disorders. Skeptical thoughts in paranoid personality disorder, beliefs that they will not be accepted in close relationships in schizoid personality disorder, and skepticism and bizarre thoughts in schizotypal personality disorder (Kring and Johnson 2019, Altunkaya and Hocaoglu 2023). Intense worries that the person will be seen as evil or threatened lead to bizarre behavior patterns. In addition, expectations of criticism and rejection push people into social isolation as in schizoid personality disorder (Altunkaya and Hocaoglu 2023). In an experimental study, paranoid thoughts and interpersonal sensitivity were found to be related (Freeman et al. 2008).

Psychotic Symptoms

Considering that genetic factors play a role between 31% and 44% in psychosis, the influence of environmental factors has a critical impact on the development and process of psychosis (Masillo et al. 2018, Georgiades et al. 2023). The fact that not all individuals in psychosis are exposed to early adverse life events has led to the investigation of other environmental factors. Psychosocial stress is one of the environmental factors leading to the onset of psychotic experiences (Masillo et al. 2018). In addition, individuals in psychosis have been found to have more intense emotional reactions to daily events compared to other individuals (Myin-Germeys et al. 2003). Withdrawal from the social environment seen in interpersonal sensitivity is also a common behavior in psychosis. Interpersonal sensitivity is thought to play an important role in the transition to psychosis. Studies have found high interpersonal sensitivity scores in individuals with psychosis (Kim et al. 2019, Georgiades et al. 2023).

Cognitive Distortions

Boyce and Parker (1989) see interpersonal sensitivity as a risk factor in the development of psychopathology and emphasize that it is one of the personality traits predisposing to depression. Early experiences affect the presence and intensity of some personality traits through the interaction of biological, psychological and environmental processes, and affect the course of the process by predisposing to psychiatric disorders (Boyce and Mason 1996, Erözkan 2004). The presence of these personality traits also closely affects relationships and causes individuals to make cognitive errors in perceiving and interpreting events and to maintain psychiatric symptoms (Yıldız and Ekşi 2021). These cognitive errors, also referred to as cognitive distortions, are seen as the basis of emotional difficulties in relationships and psychiatric disorders (Ersoy Kart et al. 2018). Beck (2002) emphasizes that prejudiced and erroneous thoughts that people make in the process of processing the information they acquire play an important role in the initiation and maintenance of relationships.

Beck defined cognition as a structure that includes thoughts, perceptions and attitudes about oneself, one's environment and the world and created the cognitive theory by utilizing this thought system as a result of his studies with individuals diagnosed with depression. This theory suggests that cognitive processes and thought system, the attributions made in perceiving and interpreting events mediate emotions and behaviors towards experiences (Beck et al. 1979, Bulut et al. 2020). In Beck's evaluation of patients with depression, it was determined that negativity was at the forefront in the thought content of the patients, they exhibited negative evaluation and self-criticism towards the past, hopelessness and negative expectations for the future (Beck 2002). According to Beck, these depressive symptoms are caused by individuals' thought errors and misinterpretations of events (Kramer et al. 2014). As a result, cognitive distortions, which occur as a result of dysfunctional processing of cognitions about oneself, the environment and the world, affect the way of perceiving events and pave the way for psychological problems with inferences that do not reflect reality (Yurica and DiTomasso 2005, Covin et al. 2011, Roberts 2015).

In Beck's theory, he associated the basis of people's negative thoughts about themselves, their environment and the world with three cognitive structures (Beck et al. 1979). These structures are automatic thoughts, intermediate beliefs and core beliefs (Herbert and Forman 2011, Ari 2021). On the basis of cognitive distortions, there is a structure that is shaped by the past experiences of the individual and shows an individual-specific development. Beck defines this structure as schema in cognitive theory. Schema is a cognitive process that begins to take shape with early experiences and mediates the interpretation of life events (Oran 2021). Thus, in order

to make sense of the new stimulus, the person makes evaluations by reviewing their previous experiences about the situation (Gör et al. 2017, James et al. 2004, Roberts 2015). With this evaluation, the person tends to shape and maintain the information obtained by forming beliefs about themselves and their environment (Roberts 2015). In order for an individual to develop in a healthy and harmonious manner, basic physical and emotional needs must be met. As a result of negative interactions and negative experiences with primary caregivers and the environment in the early period, rigid, resistant to change, dysfunctional maladaptive schemas are formed (Gör et al. 2017).

Intermediate beliefs, which are between schema and automatic thoughts, are defined as beliefs and rules that are acquired through schemas as a result of experiences and that the person consciously adopts without realizing it (Arı 2021). Automatic thoughts, which constitute the closest part of the cognitive structure to the surface, are thoughts that the person cannot easily control, are specific to a certain event, and are formed as a result of experiences (Beck 2002, Covin et al. 2011, Arı 2021). Beck states that cognitive distortions arise from thought patterns formed as a result of intermediate beliefs and negative core beliefs by evaluating and processing information from the environment through thought errors (Bulut et al. 2020) and maladaptive schemas (Yurica and DiTomasso 2005, Roberts 2015).

People with high levels of cognitive distortion make negative interpretations and attributions by selectively focusing more on the negativities in their experiences in a biased manner (Beck 2002). These negative interpretations and attributions cause the experience to be perceived as an insurmountable, unsolvable, intensely stressful situation with the effect of cognitive distortions (Roberts 2015). In addition, while evaluating the experiences, the individual tends to blame and intensely attribute the results to oneself and criticize oneself by directing all the negativities to oneself instead of externalizing the outcome of the event due to the effect of cognitive distortions (Leung and Wong 1998, Beck 2002).

Beck first identified six basic cognitive distortions. The first of these is arbitrary inference. It refers to making false and negative interpretations by making evaluations about one's own beliefs despite the lack of sufficient evidence. Selective abstraction, another cognitive distortion, is defined as focusing only on a certain point of events, ignoring others and attributing this negative result to all other situations. Magnification and minimization dimension is defined as exaggerating the negative aspects of the events and ignoring the positive aspects. Overgeneralization is expressed as a cognitive distortion that refers to making an inference based on certain negative experiences and that this situation will be repeated continuously in the future. Personalization, another cognitive distortion, is defined as directing negative experiences or others' negative moods towards oneself. The last dimension defined by Beck, binary thinking (all or nothing), is expressed as the person's evaluation of events at two extremes. It is seen that people with intense cognitive distortions focus on the negative side of these two extremes (Wilkes 1994, Yurica and DiTomasso 2005, Roberts 2015).

Based on and adding to the cognitive distortions defined by Beck, Burns defines ten cognitive distortions: "all or nothing thinking", "ignoring the positive", "emotional reasoning", "jumping to conclusions", "labeling", "magnification or minimization", "mental filter", "overgeneralization", "personalization", "expressions of obligation" (Burns 1980, Roberts 2015, Yurica & DiTomasso, 2005). Freeman and et al. discussed cognitive distortions in three categories: "externalization of personal values", "comparison" and "perfectionism" (Freeman and DeWolf 1992, Yurica and DiTomasso 2005). Gilson and Freeman (1999) defined eight cognitive distortions as "ignoring", "attachment control", "fairness", "being right", "worrying", "change fallacy", "control" and "reward fallacy" (Gilson and Freeman 1999, Agnihotri and Shanker 2023, Yurica and DiTomasso 2005, Roberts 2015).

There are both Turkish adaptation studies and scale development studies in Turkey for the measurement of the concept of cognitive distortion. The first of these was created by Türküm (1996) under the name of "Irrational Thoughts Scale" and then revised and reduced to 15 items and renamed as "Cognitive Distortions Scale". The scale has three sub-dimensions: "approval", "personal relationships" and "self". A few years later, Hamamcı and Büyüköztürk (2003) developed the "Interpersonal Cognitive Distortion Scale", which consists of 19 items and has three sub-dimensions: "intimacy avoidance", "unrealistic relationship expectation" and "mind reading". Kaya (2018) developed the "Cognitive Distortions Scale Related to Academic Success" to measure cognitive distortions related to high school students' educational lives. In addition, Batmaz, Koçbıyık, and Yuncu (2015), Ardanç (2017), Ağır and Yavuzer (2018) conducted Turkish validity and reliability studies of different cognitive distortion scales.

Cognitive Distortions and Psychopathology

The cognitive model emphasizes that the thought system and core beliefs are at the basis of people's emotional

and behavioral reactions. In this model, cognitive distortions are defined as the individual's negative evaluation of life and events (Türkçapar 2020). Cognitive distortions cause the person to internalize the problem by causing the person to attribute the responsibility to himself more than necessary instead of externalizing the event (Leung and Wong 1998, Beck 2002). When cognitive distortions are examined, critical and accusatory thoughts that make the individual feel inadequate, reduce self-esteem, and decrease self-esteem come to the fore. While making evaluations, the attributions for the events that pass through this thought filter cause negative self-perception (Ağır 2007).

Depression

Perceiving events with cognitive distortions including negative evaluation and biased inferences leads to the emergence of depression (Leung and Wong 1998). In a study conducted in a clinical group, cognitive distortions such as catastrophizing, overgeneralization, emotional reasoning and excluding the positive were found to be associated with depression (Özdel et al. 2014). In other studies, cognitive distortions were found to be associated with depression (Nyarko and Amissah 2014, Özdel et al. 2021). Beck stated that interventions to reduce negative thoughts and beliefs of individuals in the cognitive model will lead to a decrease in depressive symptoms (Persons et al. 2023).

Anxiety Disorders

There is more than one possibility for an event in anxious individuals. Therefore, the person pays attention to the threat elements for these possibilities (Roberts 2015). Ingram and Kendall (1987 as cited in Roberts 2015) stated that threat schema is at the basis of anxiety. The presence of this negative schema in the person creates dysfunctional thoughts about their own behavior and the way others interpret this behavior (Türkçapar 2020). Inferring from these thoughts leads to cognitive distortions (Kaplan et al. 2017). In addition, people exhibit withdrawal behavior from the social environment due to their prejudices towards their own self. In this way, they avoid painful emotions and the condition they see as a threat (Kuzucu et al. 2020). As it is understood from here, cognitive distortions have an important place in the emergence and maintenance of social anxiety. Having high standards for oneself leads to social anxiety through cognitive distortions. These unrealistic expectations cause the individual to feel inadequate and have difficulty coping with experiences (Karabacak et al. 2015).

In a study conducted with adolescents, it was found that cognitive distortions were associated with higher anxiety and anxiety was associated with the overgeneralization type of distortion (Tairi et al. 2016). The scores of catastrophizing, selective abstraction and overgeneralization cognitive distortions were found to be higher in adolescents diagnosed with anxiety than in the control group (Suadiye and Aydın 2009). A relationship has been found between cognitive distortions and anxiety (Kuzucu et al. 2020, Buğa and Kaya 2022). Another study found a relationship between anxiety and cognitive distortions such as overgeneralization, personalization, ignoring the positive, and mind reading (Maric et al. 2011). In the study conducted by Wilson et al. (2011), cognitive distortions were found to be associated with anxiety symptoms, and cognitive distortions were determined as an important predictor of anxiety and depression symptoms.

In the early years of life, individuals form mental representations of themselves and others on the basis of the relationship they establish with their caregivers. These mental representations become a source for new relationships to be formed (DiTommaso et al. 2003). Negative relationships with caregivers and rigid parental attitudes negatively affect cognitive processes. As a result, rigid, perfectionist, unrealistic thoughts in the individual cause cognitive distortions (Başbuğ and Cesur 2017). Separation anxiety is the feeling of intense anxiety that the individual will lose or separate from the person with whom they have a bond as a result of the failure to develop a secure relationship with the caregiver (Colak and Sireli 2023). In a study, it was found that the symptoms of separation anxiety disorder were associated with cognitive distortions of self-perception, helplessness, self-blame, focusing on danger and hopelessness (Colak and Sireli 2023). In another study, it was concluded that cognitive distortion sub-dimensions of intimacy avoidance and unrealistic relationship expectancy predict separation anxiety symptoms (Başbuğ and Cesur 2017).

The perception of the surrounding stimuli as more threatening than the existing ones causes intense physical activity and negative emotional symptoms (D'Angelo 2024). In a study, it was found that people with panic disorder symptoms had higher negative automatic thoughts and intermediate beliefs than the control group (Kuru et al. 2022). The main cognitive distortions seen in generalized anxiety disorder are catastrophizing, underestimation (Çiçek 2016), overgeneralization, excessive focus on the negative and intolerance of uncertainty (Beck 2005 as cited in Özdemir and Kuru 2023). These cognitive distortions cause people to be

overstimulated and increase their focus in the face of events. The further triggering of anxiety by uncertain situations results in inadequacy and difficulty in coping (Barlow 2004). In one study, cognitive distortions such as "mind reading", "all-or-nothing thinking" and "should-statements" thoughts were found to be higher in people with generalized anxiety disorder compared to the control group (Çiçek 2016).

Personality Disorders

Personality disorders are characterized by impairments in self-identity and self-perception, social relationships and functionality (Kring and Johnson 2019). According to Beck, dysfunctional beliefs are at the basis of personality disorder (Beck et al. 2004, Akyunus and Gençöz 2016). Moreover, genetic and environmental factors play a role in the development and maintenance of personality disorder through these dysfunctional cognitions (Akyunus and Gençöz 2016). These rigid beliefs, expressed as cognitive distortions, are reinforced by experiences and cause problems in interpersonal relationships and impulse control. These problems and impairment in cognition result in negative emotional experiences and maladaptive behaviors (Ergin and Alkar 2022).

Avoidant Personality Disorder

Avoidant Personality Disorder (APD) is a disorder that includes avoidance behaviors in environments where there are intense concerns about criticism, rejection and feedback and negative expectations (Kring and Johnson 2019, Ergin and Alkar 2022). In APD, the individual has core beliefs about themselves such as "I am inadequate", "I am worthless", "I am incompatible", "I am incompetent" (Beck et al. 2004). They also have beliefs about other people such as "they don't care about me" and "they will criticize me". Instead of questioning these negative cognitions, they prefer to avoid the situation. They prefer to avoid changing these negative cognitions rather than questioning them. For this reason, they stay away from situations where they think they will be offended, disapproved or unsuccessful, and from relationships where such comparisons will be made (Ergin and Alkar 2022). A study found a relationship between APD and the sub-dimensions of concern about disapproval and pleasing others (Nordahl and Stiles 2000).

Dependent Personality Disorder

Dependent Personality Disorder (DPD) is a personality disorder characterized by excessive dependence on other people and lack of self-confidence (Kring and Johnson 2019). In DPD, individuals feel helpless and inadequate in making decisions and taking responsibility. For this reason, they prefer to take simple responsibilities and remain passive by following the directions of others. The core belief in this disorder is weakness and powerlessness. In order to compensate for this, the person tends to attach to a figure that they see as stronger than themselves (Ergin and Alkar 2022).

Obsessive Compulsive Personality Disorder

Obsessive Compulsive Personality Disorder (OCPD) is a personality disorder in which important details, strict rules and perfectionism are at the forefront (Kring and Johnson 2019). These stereotyped rules, which cover a person's entire life, cause him to have problems in his social relationships and difficulty expressing his emotions (Ergin and Alkar 2022). In OCPD, the individual's basic belief is to lose control. For this reason, the individual aims to reduce errors and achieve perfection by adopting stricter rules in order not to lose control (Kring and Johnson 2019). The most common cognitive distortions in this disorder are "control" and "should" statements (Ergin and Alkar 2022). Beck et al. (2004) stated that cognitive distortions in the areas of "catastrophizing", "black and white thinking" and "magnification" are common in people with OCPD. They stated that these cognitive distortions lead people to be more rigid and perfectionist (Beck et al. 2004, Tabur 2020).

Paranoid Personality Disorder

Paranoid Personality Disorder (PPD) is characterized by cognitive distortions expressed through distrust and skepticism (Kring and Johnson 2019). The cognitive distortions that are intense in these perceptions and beliefs cause the person to exhibit maladaptive behaviors. People with PPD have cognitions that they are innocent, defenseless and right. They have core beliefs that other people are unreliable and that they need to be constantly on guard against them. This way of perception, which approaches all kinds of stimuli suspiciously, leads to misinterpretations (Beck et al. 2004, Tabur 2020).

Schizoid Personality Disorder

Schizoid Personality Disorder (SPD) is a personality disorder characterized by avoiding social relationships and preferring to be alone (Kring and Johnson 2019). People with SPD have cognitions that they are self-sufficient

and should be alone. With these thoughts, the person avoids establishing intimacy and adopts a life away from the social environment where they are alone (Beck et al. 2004, Bowins 2010, Tabur 2020).

Antisocial Personality Disorder

Antisocial Personality Disorder (APD) is a disorder characterized by harmful and criminal behavior without regard for the rights of others (Kring and Johnson 2019). One of the most common cognitive distortions in this disorder is self-serving (Chabrol et al. 2011). They also have the idea that they can do anything and feel entitled. For this reason, they exhibit impulsive and thrill-seeking behaviors such as substance abuse, aggression tendency and involvement in crime (Chabrol et al. 2011, Uğur and Murat 2014). Their belief that they can do anything causes them to lack empathy and not to feel guilty for their behaviors (Chabrol et al. 2011).

Borderline Personality Disorder

Borderline Personality Disorder (BPD) is a personality disorder characterized by instability in interpersonal relationships and impulsivity in mood (Kring and Johnson 2019). The main belief seen in this disorder associated with early negative experiences is abandonment (Del Pozo et al. 2018). Beliefs are formed in the individual that this abandonment will be repeated through overgeneralization from cognitive distortions (Beck et al. 2004). They are sensitive to criticism and rejection by paying attention to all kinds of warnings to prevent abandonment. This situation causes deterioration in social relationships, damaging behaviors or intense outbursts of anger with negative evaluations (Del Pozo et al. 2018).

Research on Interpersonal Sensitivity and Cognitive Distortions

National and international studies examining the relationship between interpersonal sensitivity and cognitive distortions were reviewed. Boyce and Mason (1996), one of the first to address these concepts, suggested that people who are prone to depression are more sensitive to their relationships and that cognitive distortions, which are common in depression, increase interpersonal sensitivity by affecting relationships. Vidyandhi and Sudhir (2009) found that in a clinical sample with high interpersonal sensitivity, dysfunctional attitudes were also high and there was a positive relationship between interpersonal sensitivity and dysfunctional attitudes. Otani et al. (2018) found a positive relationship between interpersonal sensitivity and negative core beliefs about the self. Hiçdurmaz and Öz (2016), in their intervention study for university students on the basis of cognitive behavioral therapy, observed that there was a decrease in students' interpersonal sensitivity and automatic thought scores after the intervention. In another study, when cognitive distortions related to relationships and interpersonal sensitivity were examined; it has been found that "interpersonal worry and dependency" are positively related to "unassertive interpersonal behavior" and cognitive distortions related to relationships predict interpersonal sensitivity (Demiray 2018). Sapmaz (2011) observed that participants' interpersonal sensitivity levels decreased by working on their cognitive distortions and automatic thoughts through a nine-session group intervention program based on cognitive behavioral therapy techniques.

Conclusion

It is known that personality traits may predispose to psychopathology and directly or indirectly affect the course of the process and response to treatment. The presence of some personality traits causes the emergence and maintenance of negative emotions through misinterpretation and inference of events in the thought system. This study shows the effect of interpersonal sensitivity, which is seen as an individual risk factor, on perception and interpretation of events. It also shows that these perceptions and interpretations lead to cognitive distortions by causing erroneous interpretations and inferences through the thought system. The effects of both concepts on the individual's life and psychological health are explained. The effects of both concepts on the individual's life and psychological health are evident and should be further explored in future studies.

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