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# The Mediator Role of Rumination about an Interpersonal Offense in the Borderline Personality Features and Depression

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#### Abstract

The purpose of this study is to investigate the role of rumination about an interpersonal offense (RIO) in mediating borderline personality features and depression. The sample for this study was determined by random sampling, and the participants were 419 people, 218 women (52%) and 201 men (48%), aged 18-35, residing in Istanbul in 2022 and who willingly participated in the research. The participants were administered the Sociodemographic data form, the Borderline Personality Questionnaire (BPQ), the Zung Depression Scale (ZDS), and the Rumination about an Interpersonal Offense Scale (RIOS), and the data obtained in the study were analyzed using IBM Statistical Package for Social Sciences (SPSS) program version 25.0. Pearson correlation analysis, the independent group t-tests, ANOVA, and PROCESS 3.5 were used. The confidence interval referenced in the whole study was 95%, and the p value was 0.05. The study's findings suggest that RIO mediates the relationship between depressive symptoms and borderline personality characteristics. RIO, borderline personality features (r=0.525, p<0.01), and depression (r=0.524, p<0.01) were revealed to be positively and significantly correlated. It has been claimed that people with borderline personality characteristics may use rumination as a maladaptive coping method in their interpersonal relationships. It has been determined that individuals with borderline personality features may have other-oriented ruminative tendencies, and RIO can be described as a cognitive vulnerability in borderline personality disorder (BPD). It is advised to reduce RIO and utilize cognitive strategies to replace borderline patients' dysfunctional beliefs about themselves, others, and the world with functional beliefs for the treatment of BPD and its accompanying depressive symptoms.

**Keywords:** borderline personality features, borderline personality disorder, rumination, interpersonal offense, depression

#### Öz

#### Borderline Kişilik Özellikleri ve Depresyonda Kişilerarası Hataya İlişkin Ruminasyonun Aracı Rolü

Bu araştırmanın amacı, borderline kişilik özellikleri ve depresyonda kişilerarası hataya ilişkin ruminasyonun aracı rolünün incelenmesidir. Bu çalışmanın örneklemi tesadüfi örnekleme ile belirlenmiş olup, katılımcılar 2022 yılında İstanbul'da yaşayan 18–35 yaşları arasında araştırmaya gönüllü olarak katılan 218 kadın (%52) ve 201 erkek (%48) olmak üzere 419 kişidir. Katılımcılara Sosyodemografik Bilgi Formu, Borderline Kişilik Ölçeği (BKÖ), Kişilerarası Hataya İlişkin Ruminasyon Ölçeği (KHİRÖ) ve Zung Depresyon Ölçeği (ZDÖ) uygulanmıştır ve araştırmada toplanılan verilerin istatiksel analiz işlemleri için IBM Sosyal Bilimlerde İstatistik Paket Programı (SPSS) sürüm 25.0 programından yararlanılmıştır. Verilerin analizinde, Pearson korelasyon analizi, gruplar arası Bağımsız Gruplar t-testi, ANOVA ve PROCESS 3.5 kullanılmıştır. Tüm çalışma kapsamında referans alınan güven aralığı %95, p değeri 0,05'tir. Çalışmadan elde edilen sonuçlarda, KHİR'nin borderline kişilik özellikleri ve depresyonda aracı bir rolü olduğu ve KHİR'nin borderline kişilik özellikleri (r=0,525, p<0,01) ve depresyonla (r=0,524, p<0,01) arasında pozitif yönde anlamlı bir ilişki olduğu saptanmıştır. Borderline kişilik özellikleri gösteren kişilerin, kişilerarası ilişkilerinde, olumsuz duygu ve düşünceler ile başa çıkmak için uyumsuz bir strateji olarak ruminasyonu kullanabileceği ve KHİR'nin borderline kişilik bozukluğunda bilişsel kırılganlık olarak nitelendirilebileceği tespit edilmiştir. Bu doğrultuda borderline kişilik bozukluğu ve eşlik eden depresif belirtilerin tedavisinde, KHİR'nin azaltılmasının dikkate alınması gerekmektedir. Tedavi sürecinde borderline hastaların kendisine, ötekine ve dünyaya dair işlevsel olmayan inançlarının işlevsel olan inançlarla değiştirilmesi adına bilişsel tekniklerin kullanılması önerilmektedir.

Anahtar Kelimeler: borderline kişilik özellikleri, borderline kişilik bozukluğu, ruminasyon, kişilerarası hata, depresyon

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# INTRODUCTION

Borderline personality disorder (BPD) is a mental disease characterized by inconsistency and variability in social relationships, feelings, thought processes, self-perception, and behavior (Faraji, 2021). Borderline personality disorder is 10% common in outpatient psychiatric patients, and 15% to 22% common in inpatient psychiatric patients (Klein, Fairweather & Lawn, 2022). In borderline personality organization, the features which define BPD are manifested at a lesser level and severity. The increase in these features brings the person closer to BPD from borderline personality organization and makes their life more disoriented (Faraji & Güler, 2021).

The fact that individuals with BPD adopt a clingy relationship style due to the lack of object permanence and try to establish an unfriendly dominance in their interpersonal relationships may cause the people in their lives to distance themselves at times. When an intense sense of guilt, which may develop as a result of this, is combined with already low self-esteem and worthless self-perception, symptoms of depression may deepen (Millon, Grossman, Millon, Meagher, & Ramnath, 2021; Faraji & Tezcan, 2022).

Patients with BPD are characterized by ego weakness. Accordingly, self-worth is predominantly shaped by the other, and there is dependency in close relationships. They have an intense fear of abandonment and the effort not to be abandoned; it can manifest in threatening, clingy, demanding behaviors (Gunderson Herpertz, Skodol, Torgersen, & Zanarini, 2018). They have a very low tolerance threshold for rejection, anxiety, or being left out. However, they do not have object permanence, and this may lead to the use of maladaptive coping mechanisms in a negative situation in their relations with the other when they think their needs are not being met, when they are rejected by the significant other or when they feel left alone by the other (Rockland, 2016; Faraji & Tezcan, 2022). At this point, it is possible that rumination, which is characterized by the uncontrollable repetition of personal problems in the mind, may play a role in BPD as a maladaptive strategy. Hence rumination pups up when an individual constantly thinks about the negative emotions and the symptoms, possible causes, and consequences of these emotions but does not take action to solve the problem (Nolen-Hoeksema, 2000). Rumination about an interpersonal offense is the ongoing consideration of the origins of unpleasant emotions that develop as a result of various past mistakes (Oral & Arslan, 2017). Rumination about an interpersonal offense can be considered an important variable in terms of borderline personality features

and along with depression, especially in terms of interpersonal dysfunction. The frequency of comorbidity between BPD and depressive disorders may increase a person's susceptibility to these symptoms and negatively affect how rumination develops (Shah & Zanarini, 2018; Mattingley Youssef, Manning, Graeme, & Hall, 2022).

Kernberg (1985) states that borderline patients are characterized by disorganized identity and, accordingly, perceive themselves, the others, and the world in an unintegrated way. For this reason, interpersonal relationships do not exhibit a consistent and co-sensitive quality; adequate satisfaction cannot be obtained from these relationships. When they encounter an unfavorable circumstance in their social relationship, they feel disappointed, undervalue themselves, and think negatively of themselves (Gunderson, 2007; Faraji & Tezcan, 2022). People who exhibit more borderline personality qualities may engage in more RIO, exhibit more depression symptoms, and have a higher level of ruminative depressive thoughts about negative events, such as betrayal and rejection, that may occur in their future relationships.

This study intends to investigate RIO's mediation role in borderline personality features and depression. It is commonly regarded that rumination can serve as a connection between the formation of psychological illnesses and certain personality It is commonly regarded that rumination can serve as a connection between the formation of psychological illnesses and certain personality characteristics. However, it is stated that BPD maladaptive areas are associated with all forms of rumination, and that rumination may thus be the basic cognitive vulnerability of BPD. Rumination is also claimed to make the signs of depression and BPD worse (Peters, Eisenlohr-Moul, Upton, Talavera, Folsom, & Baer, 2017; Cavicchioli & Maffei, 2022). When the literature is checked, it is seen that there is no study that handles borderline personality features, depression, and RIO together. The findings of this article are expected to conduce to both the determination of which cognitive processes will be addressed primarily in psychotherapeutic interventions and clinical practice. In addition, it is predicted that theoretical studies can contribute to the relevant literature.

# **METHOD**

## **Participants**

The study's universe consists of adults in Turkey. The sample for this study was determined by random sampling, and

the participants were 419 people, 218 women (52%) and 201 men (48%), aged 18–35, residing in Istanbul in 2022, who willingly participated in the research. The participants of the study, 92.8% are single, 7.2% are married, 32.2% are secondary school graduates, 61.3% are undergraduate graduates, 6.4% are graduates, 28.6% are working, 71.4% are not working, 18.9%, 69.5% have a low monthly income, 69.5% have a medium monthly income, 11.7% have a high monthly income. Twenty-seven people with mental disorders, including anxiety and depressive disorders, which frequently accompany BPD, were excluded from the study.

## Measures

## Socio-demographic Data Form

Personal information form prepared by the researcher and includes questions to obtain information about participants' age, gender, marital status, education level, employment status, monthly income level, and diagnosis of mental illness.

#### Borderline Personality Questionnaire (BPQ)

Borderline Personality Questionnaire is a self-report scale designed to assess BPD as according DSM-IV guidelines. It includes separate subscales for each guideline (Poreh, Rawlings, Claridge, Freeman, Faulkner, & Shelton, 2006). The scale has 80 questions and 9 subscales, including impulsivity, affective instability, abandonment, relationships, self-image, suicide/self-mutilation behavior, emptiness, intense anger and quasi psychotic states. The Cronbach  $\alpha$  score was 0.94, and the internal consistency coefficient ranged from 0.65 to 0.84. (Poreh, Rawlings, Claridge, Freeman, Faulkner, & Shelton, 2006). In the Turkish adaptation of the scale, the Cronbach  $\alpha$  score was .89 (Ceylan, 2017). In this study, the Cronbach  $\alpha$  value was 0.93 for the total score, 0.61 for the impulsivity subscale, 0.73 for the affective instability subscale, 0.67 for the abandonment subscale, 0.75 for the relationships subscale, 0.77 for the self-image subscale, 0.69 for suicide/self-mutilation behavior subscale, 0.72 for emptiness subscale, 0.83 for intense anger subscale, and 0.71 for quasi psychotic states subscale.

## Zung Depression Scale (ZDS)

Zung (1965) effectuate the Zung Depression Scale to create a quantitative assessment of depressive symptoms. The measure was translated into Turkish by Baltaş (1991), and research on the scale's validity and reliability were done by (Gençdoğan & Ören, 2011). It consists of 20 items and is based on self-report. Each item is intended to rate how the participant felt in the previous week. Item responses are ranked from 1 to 4. In the analysis made for university students; for normal students, the Cronbach  $\alpha$  value was 0.79, the Guttman Split-half half reliability value was 0.68, and the Spearman-Brown two-half correlation value was 0.70 (Gençdoğan, 2001; Gençdoğan & Ören, 2011). In this study, the Cronbach  $\alpha$  value was 0.84 for the total score.

#### Rumination about an Interpersonal Offense Scale (RIOS)

Wade, Vogel, Liao, and Goldman (2008) created the RIOS scale to assess negative emotions and repetitive thoughts that occur as a result of a past interpersonal event. It consists of 6 items and is based on self-report. Item responses are ranked from 1 to 5. High scores obtained from the scale indicate a high level of RIO. Oral and Arslan (2017) translated the scale into Turkish. Four hundred and fifty university students participated in reliability and validity studies. The Cronbach  $\alpha$  value was 0.88 (Oral & Arslan, 2017). In this study, the Cronbach  $\alpha$  value was 0.92 for the total score.

## Procedure

Before collecting data, ethics committee approval was taken from the ethical committee of the Istanbul Aydin University (Date: 10.03.2022, No: 2022/04) then, necessary permissions and information were obtained from the people who made the Turkish adaptation of the scales used in the study. As well as all procedures followed comply with the 1975 Declaration of Helsinki as revised in 2000. The scales were hand-delivered to the participants with personal information form and information. In order to protect privacy, no information was received from the participants about their identities. The scales take an average of 20 minutes to be completed by the participants. The IBM Statistical Package for Social Sciences (SPSS) program version 25.0 package program was used to examine the study's data.

#### **Data Analysis**

First, the collected data were transferred to the IBM Statistical Package for Social Sciences (SPSS) program version 25.0 program for data analysis. Then, the conformity of the data to the normal distribution was evaluated. In order to evaluate this assumption, the kurtosis and skewness coefficients were examined, and the fact that these two coefficients are in the -2 and +2 value range indicates that the normal distribution assumption is realized (Hahs-Vaughn & Lomax, 2020). After this evaluation, analyses were continued using parametric tests.

Pearson correlation analysis was used to test the relationship between variables, Independent Groups t-test and ANOVA were used to determine the significant difference between groups. Intermediary role analyses were performed with PROCESS 3.5. The confidence interval referenced in the whole study was 95%, and the p value was 0.05.

# RESULTS

As a result of the correlation analysis, a moderate and positive correlation was found between Zung Depression Scale and the following variables: Borderline Personality Questionnaire (r=0.660, p<0.01), Affective Instability (r=0.630, p<0.01), Abandonment (r=0.495, p<0.01), Relationships (r=0.505, p<0.01), Self-image (r=0.545, p<0.01), Suicide/self-mutilation Behavior (r=0.536, p<0.01), Emptiness (r=0.626, p<0.01), Intense Anger (r=0.428, p<0.01). A weak and positive correlation was found between Zung Depression Scale and Quasi Psychotic States (r=0.299, p<0.01).

As a result of the correlation analysis, a moderate and positive correlation was found between RIOS and the following variables: Borderline Personality Questionnaire (r=0.525, p<0.01), Affective Instability (r=0.520, p<0.01), Abandonment (r=0.409, p<0.01), Relationships (r=0.398, p<0.01), Self-image (r=0.377, p<0.01),

Suicide/self-mutilation Behavior (r=0.317, p<0.01), Emptiness (r=0.469, p<0.01), Intense Anger (r=0.345, p<0.01), Quasi Psychotic States (r=0.315, p<0.01), Zung Depression Scale (r=0.524, p<0.01).

When we evaluated the results in the table of findings, it was seen that the independent variable of the Borderline Personality Questionnaire explained 43% of the variance in the dependent variable score of the Zung Depression Scale in the first model. In the second stage, the independent variable of the RIOS was added to the model. It was observed that the independent variable of the RIOS explained 04% of the variance in the dependent variable score of The Zung Depression Scale. The independent variables of the Borderline Personality Questionnaire and the RIOS were determined according to the findings, which explained 47% of the variance in the scores of the dependent variable of the Zung Depression Scale. With the addition of the independent variable of the RIOS in the second stage, the beta value of the independent variable of the Borderline Personality Questionnaire decreased from 0.66 to 0.53. Then, to control this decrease in beta value, 5000 resampling options and 95% confidence interval options were applied in the Bootstrapping analysis, and it was found that the lower limit and upper limit did not include 0 in the result. When the mediator role analysis results were evaluated, it was determined that there was partial mediation according to the findings.

	1	2	3	4	5	6	7	8	9	10	11	12
1- Borderline Personality Questionnaire	1											
2- Impulsivity	0.387**	1										
3- Affective Instability	0.827**	0.210**	1									
4- Abandonment	0.796**	0.241**	0.610**	1								
5- Relationships	0.766**	0.218**	0.619**	0.603**	1							
6- Self-image	0.691**	0.131**	0.504**	0.547**	0.450**	1						
7- Suicide/self- mutilation Behavior	0.616**	0.221**	0.451**	0.452**	0.367**	0.433**	1					
8- Emptiness	0.807**	0.118*	0.647**	0.633**	0.590**	0.671**	0.440**	1				
9- Intense Anger	0.726**	0.304**	0.570**	0.492**	0.490**	0.282**	0.401**	0.450**	1			
10- Quasi Psychotic States	0.552**	0.172**	0.401**	0.355**	0.320**	0.290**	0.307**	0.365**	0.310**	1		
11- Zung Depression Scale	0.660**	-0.026	0.630**	0.495**	0.505**	0.545**	0.536**	0.626**	0.428**	0.299**	1	
12- RIO	0.525**	0.044	0.520**	0.409**	0.398**	0.377**	0.317**	0.469**	0.345**	0.315**	0.524**	1

Μ	Model		R2	В	SH	β	Т	р	Lower Limit	Upper Limit
(Co	Constant)	0.29	0.43	38.35	0.81		47.07	0.000*	36.75	39.95
1	Borderline Personality Questionnaire			0.56	0.03	0.66	17.93	0.000*	0.49	0.62
	(Constant)	0.36	0.47	32.96	1.20		27.43	0.000*	30.60	35.32
	orderline Personality Questionnaire			0.45	0.03	0.53	12.78	0.000*	0.38	0.52
2	RIOS			0.41	0.07	0.25	5.92	0.000*	0.28	0.55
	Indirect Total Impact (Intermediary)			0.11	0.02				0.07	0.15

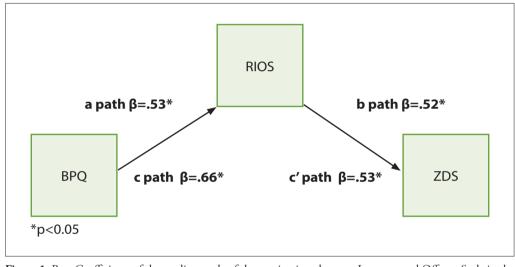


Figure 1. Beta Coefficients of the mediator role of the rumination about an Interpersonal Offense Scale in the Prediction of the Borderline Personality Questionnaire to the Zung Depression Scale.

# DISCUSSION

This study's primary findings revealed that RIO mediates the relationship between depression and borderline personality features. Although the literature has not yet studied the interaction between RIO, borderline personality features, and depression, Kovács, Schmelowszky, Galambos, and Kökönyei (2021) found that rumination mediates the connection between borderline features and depressive symptoms. This condition demonstrates that rumination, a maladaptive emotion management technique, along with borderline personality features can cause depression symptoms to develop or worsen in the presence of negative interpersonal relationships.

The findings of this research reveal a significant relationship between RIO and borderline personality features. It is seen that there are studies showing that BPD and rumination are related (Abela, Payne, & Moussaly, 2003; Smith, Grandin, Alloy, & Abramson, 2006; Selby & Joiner Jr, 2009), and studies indicate that borderline patients tend to think ruminatively to avoid disturbing emotions and events (Yaroslavsky, Napolitano & France, 2019; Cavicchioli & Maffei, 2022). It is well recognized that rumination amplifies and prolongs the negative effect, and those specific psychopathologies, such as depressive disorders and BPD, are associated with higher rates of rumination (Thomsen, 2006; Watkins & Roberts, 2020; Nagy, Shanahan & Seaford, 2023). A meta-analysis study aiming to comprehensively examine the role of rumination in BPD, supporting the results of this article, shows that there is a significant relationship between interpersonal rumination and borderline personality features, and at the same time, rumination is a cognitive vulnerability used in various emotional states in individuals with borderline personality features (Cavicchioli & Maffei, 2022). People who have been diagnosed with BPD frequently experience various negative moods and have negative interactions

with others (Peters et al., 2017). It is seen that negative interpersonal interactions increase rumination and maintain negative emotions in BPD (Napolitano, 2018). It is thought that this situation may create a vicious circle.

Dysfunctional beliefs in BPD have a negative effect on the interpersonal functions of borderline patients (Pretzer & Beck, 2005; Bhar, Brown & Beck, 2008). It is claimed that these three fundamental presumptions play a role in BPD: *"The world is full of threats and evil intents," "I am fragile and vulnerable to harm," and "I am a naturally undesirable person."* (Türkçapar & Işık, 2000; Beck, Davis & Freeman, 2015; Türkçapar, 2021). It can be argued that people who exhibit borderline personality features use rumination as a maladaptive strategy to cope with the anxiety and tension arising from these assumptions, and the emotions and thoughts that cause distress in their interpersonal relationships.

It is seen that there is a significant relationship between RIO and identity disorder and negative relationships, which are subscales of borderline personality features (Peters et al., 2017). Borderline patients, have a severe defection at developing a sense of self that is separate from the other. Because they are characterized by a weak ego, when the other is absent, a chronic feeling of emptiness occurs and their lives become meaningless. Accordingly, intolerance of loneliness and fear of abandonment occur (Klonsky, 2008; Faraji & Tezcan, 2022). Likewise current study shows that there is a positive and significant relationship between RIO and the following sub-dimensions of borderline personality: self-image, abandonment, relationships, and emptiness.

Rumination about an interpersonal offense and the following borderline personality questionnaire subscales -affective instability, relationships, self-image, suicide/ self-mutilation behavior, and intense anger- were shown to be significantly correlated in this article. Reichl & Kaess (2021) state that suicidal and self-mutilating behaviors may be observable symptoms of underlying problems in interpersonal relationships. A meta-analysis study aiming to examine the relationship between BPD characteristics and rumination states that similar to this research, there is a significant relationship between rumination and BPD symptoms, especially affective instability, inconsistent relationships, identity disorder, and self-harm (Richman Czegel, Unoka, Dudas, & Demetrovics, 2022). Rumination plays a mediation function between borderline personality features and self-harming behaviors, according to another study (Gardner, Dodsworth & Selby, 2014). However, Peters et al. (2017) state in their study that, unlike the results of this study, there is no significant relationship between the suicide/self-mutilation behavior and RIO and that there is a significant relationship between self-harm and anger rumination. It is conceivable that people who exhibit borderline personality qualities may also use anger rumination in addition to RIO to deal with negative aspects of interpersonal interactions. It can be thought that if anger rumination is used rather than RIO to cope with negativities in interpersonal interactions, self-mutilation behavior can be more encouraged. As a matter of fact, since anger rumination was not measured in the current study, the role of anger rumination cannot be determined in the relationship between RIO and suicide/self-mutilation behavior.

Borderline patients' have two extreme tendencies that oscillate between seeing the other as dangerous due to their dysfunctional beliefs and being dependent on the other due to constructing oneself with the other (Türkçapar & Işık, 2000; Hepp, Lane, Wycoff, Carpenter, & Trull, 2018). Borderline patients can quickly devalue the idealized other. As a result, so intense reactions and tension occur in interpersonal relationships. The tension arising from interpersonal relationships triggers feeling depressed. Borderline patients have a low tolerance for these emotions because they do not have a strong ego to deal with these intense emotions. Therefore, they can harm themselves to get away from these feelings (Maffei & Fusi, 2016; Faraji & Tezcan, 2022). It can be considered that borderline patients may be utilizing RIO to control the sense of emptiness and loneliness that arises from interpersonal relationships. The need to eliminate the feeling of loneliness and emptiness, which intensifies with rumination, and the need to feel their existence, can be thought that may cause intense anger and attempts to harm themselves (Masterson & Rinsley, 1975; Klonsky & Muehlenkamp, 2007; Faraji, 2020). According to the study's findings, there is a substantial correlation between borderline personality, RIO, and the following borderline personality subscales: suicide/self-mutilation behavior, abandonment, emptiness, intense anger, and relationships. Cho, Waite, Ammerman, and Dixon-Gordon (2022) indicate that borderline personality features and depressive rumination increase suicidal ideation, supporting the results of this study.

In this article, it was inferred that there was a positive and significant relationship between depression and RIO and

the following borderline personality subscales: affective instability, abandonment, relationships, self-image, and emptiness. Studies with borderline patients and healthy controls; show that people with high levels of borderline personality features may experience more depressive affect in stressful situations in interpersonal contexts than individuals with low levels of borderline personality features (Tragesser, Lippman, Trull, & Barrett, 2008; Chapman, Walters, & Gordon, 2014). Selby, Anestis, Bender, and Joiner Jr (2009) declare that BPD and depression encourage the use of maladaptive strategies such as rumination, which can create a vicious circle. When individuals with BPD experience a problem in their interpersonal relationships or cannot achieve what they want, their self-perceptions and the qualities they attribute to the outside world may also vary. Accordingly, they make negative evaluations against the outside world and themselves (Hepp et al., 2018). Borderline patients, who show volatility and instability in their interpersonal relationships, expect the other person to constantly meet their needs. At the same time, they think that the other in their relationship does not care about them enough and they are not with them. As a result, emotional instability and intense reactions may occur. In interpersonal contexts, these reactions can also be experienced as depression (Renneberg, Herm, Hahn, Staebler, Lammers, & Roepke, 2012; Gunderson et al., 2018).

Borderline personality features and depressive symptoms are often seen together, and borderline patients often apply to therapy with depressive symptoms (Gunderson & Phillips, 1991; Klein & Schwartz, 2002; Beatson & Rao, 2013). As shown by Nepon, Flett, Hewitt, and Molnar (2011), there is a substantial connection between interpersonal rumination and depressed symptoms. Depending on the results of a related study, depressive rumination and dependent interpersonal stress cause depression symptoms to worsen (Flynn, Kecmanovic & Alloy 2010). In a semi-structured clinical study, it was reported that individuals with comordibity of major depressive disorder and BPD showed more cognitive vulnerability (including rumination) and depressive symptoms compared to individuals with only diagnosed major depression or no diagnosis of both (Abela et al., 2003). According to the outcomes of this study, which are consistent with studies in the literature, there is a significant relationship between RIO, borderline personality, and depression. It is also emphasized that RIO acts as a mediator between borderline personality features and depression. Based on these results, it can be

assumed that individuals with borderline personality features may have a ruminative thinking tendency shaped by the other, and this rumination can be seen as a cognitive vulnerability in borderline personality. Rumination about an interpersonal offense may serve as a mediator variable by causing existing depression symptoms to worsen and persist, which could create a vicious cycle.

## **CONCLUSION AND SUGGESTIONS**

The results of the present investigation revealed that RIO mediates the relationship between depression and borderline personality features. It has been stated that people with borderline personality characteristics may use rumination as a maladaptive coping method in their interpersonal relationships. Rumination about an interpersonal offense has been related to the establishment of a vicious circle by influencing the onset and maintenance of depressive symptoms and it can be defined as a cognitive vulnerability in BPD. In this respect, it is suggested that RIO be reduced in the treatment of BPD and associated depressive symptoms. It is recommended to use cognitive techniques to replace the dysfunctional beliefs of borderline patients to functional ones. At this point, it is recommended to identify the automatic thoughts accompanying the moments when borderline patients feel depressive feelings like sadness, sorrow, regret, disappointment etc. about their interpersonal relationships, to reveal the intermediate beliefs and to evaluate the core beliefs. It can be assumed that cognitive behavioral therapy techniques and rumination-focused cognitive behavioral therapy may be beneficial.

The sample of the study is limited to 419 people between the ages of 18–35 living in Istanbul. It is expected that including people with BPD in future studies will help to generalize the research findings to the clinical community. In order to better understand the mediator function of RIO in borderline personality features and depression, it is believed that studies using various types of rumination are necessary.

Conflict of Interest: The authors declare no conflict of interest.

Financial Disclosure: No financial disclosure was received.

Ethics Committee Approval: The study was approved by the Ethics Committee of Istanbul Aydin University (date and number of approval: 10.03.2022 / 2022/04).

**Informed Consent:** Informed consent was obtained from all individual participants included in the study.

Peer-review: Externally peer-reviewed.

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