

Introduction

Researchers have documented internal factors such as mood state as affecting the ability to recognise positive and negative emotions in individuals with BD (Lembke & Ketter, 2002), yet very little research has documented other factors in the individuals life that might contribute to impairments in recognising emotions (Johnson et al., 2007). Research that has documented internal factors as affecting ability to perceive and understand emotions in individuals with BD have shown conflicting findings; while Yurgelun-Todd et al. (2000) reported deficits in recognition of fear and disgust among persons with remitted BD, Lee et al. (2013) did not report such deficits. However, Harmer et al. (2002) found some evidence of recognition of certain emotions. The inconsistency in the evidence suggests that there may be substantial variability across individuals with BD in their ability to identify and understand emotions (Fulford et al., 2014). This study aimed to gain insight into how individuals with BD understand and describe positive and negative emotions . This study part of a larger research examining emotional intelligence (EI) in individuals with BD.

Method

This study used a thematic analysis to investigate how individuals with BD and the controls relate to emotions. Thirty-five (n=35) participants in the UK participated in semi-structured interviews, approximately half of them were individuals with BD (n=20) and the other half were controls (n=15). The ages of the participants ranged from 18 to 69 years old (mean= 38.5 years, SD=16.7).

Results

Participants described their emotional experiences which shaped the analysis. Three main themes emerged, within each theme were sub-themes that influenced the participants emotional experiences.

Theme 1: Emotion recognition

- Recognition of negative emotions
- Lack of recognition of positive emotions
- Recognition of emotion in others
- Lack of emotional transition knowledge

Theme 2: Psychological wellbeing (Ryff, & Keyes, 1995)

- Childhood and life experiences
- Suicidal episodes
- Hope/Hopelessness concerns about the future and Loss of livelihood
- Standard of living (for example jobs/ business, social and emotional functioning)

Theme 3: Psychological states

- Irritable state
- Emotion state control
- Loss of control of manic and depressive states

Conclusion

The themes of this qualitative research give a better understanding and insight into future considerations for diagnosis and treatment of BD. In addition, they highlight the important factors in understanding expression of emotions and EI in individuals with BD when compared to the controls. The participants' narratives are stories of their life course'. The lived experiences of individuals with BD indicate that periods of predictability are interspersed with overwhelming uncertainty..

"I notice more negative feelings actually"

"I do not express happiness"

"I could tell when people are depressed or something is bothering them"

"It's too quick. It's a second. It must be building up somewhere. And that's my difficulty I suppose"

"Unfortunately my particular upbringing, my family, my household, I had to shout to be understood I felt, you know, ignored, angry and sad most times"

"I have had suicidal feelings , I have made suicidal attempts"

"I have to do well, actually, things keep getting better"

"I don't think I can go back to being like I was before"

"I have had moments of being high which has led to some reckless behaviour and in the past, it led to me losing a job"

"Sometimes things that have nothing to do with me, and I will show my irritation"

"I feel frustrated that I cannot alter the way I feel simply by not trying to dwell on it. It just seems to be with me" whether or not I like it"

"I find it hard to control feeling low or depression....I am going to end up in this negative cycle. I'm not going to get out of here. I cannot cope with this. It is too intense"

- References
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