



Brief Report

Losing a job on purpose: relationships with
borderline personality symptomatologyRandy A. Sansone^{1,2} and Michael W. Wiederman³

Abstract

Aim: The purpose of the present study was to examine one facet of employment viability, losing a job on purpose, among individuals with borderline personality symptomatology (BPS).

Methods: Using a cross-sectional self-report survey methodology in a combined sample of four prior studies from the same study site ($n = 1493$), we examined the relationship between losing a job on purpose and two self-report measures for BPS.

Results: There were 7.6% of participants that endorsed losing a job on

purpose, with no statistically significant difference between the proportions of males and females. Point-biserial correlation coefficients revealed that those who endorsed losing a job on purpose scored statistically significantly higher on both measures of BPS and were more likely to exceed the clinical cut-off scores on both measures of BPS. Multiple regression analyses indicated that findings were independent of gender or age.

Conclusion: One factor in poor employment viability among individuals with BPS appears to be the behaviour of losing a job on purpose.

Key words: borderline personality, borderline personality disorder, employment, job, Self-Harm Inventory, work.

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Received 13 April 2012; accepted 16 September 2012

INTRODUCTION

Several studies examining employment histories among individuals with borderline personality disorder (BPD) indicate high rates of unemployment, difficulties with occupational self-support and high rates of disability. For example, Pope *et al.* compared occupational performance among patients with different psychiatric diagnoses and found that although patients with BPD performed better than schizophrenic patients, they did not perform as well as patients with schizoaffective or bipolar disorders.¹ Mehlum *et al.* compared patients with BPD to various other types of patients and, in terms of employment and the ability to financially support themselves, patients with BPD did not occupationally fare as well.² Employment impairment is likely chronic, as Najavits and Gunderson examined work status in patients with BPD over a 3-year period and found that functioning remained unchanged.³

Paris and Zweig-Frank compared the work status of BPD patients with community norms and found

that the patient cohort functioned at a lower level (e.g. 20% were on long-term welfare support).⁴ In a longitudinal study from Japan, Yoshida *et al.* found that only 54.2% of BPD patients were employed at follow-up.⁵ Over a 10-year period, Zanarini *et al.* found that at baseline and follow-up, 40.7% and 44.2% of BPD patients, respectively, were on Social Security Disability.⁶ Skodol *et al.* reported that individuals with BPD evidenced more impaired functionality in the work setting than participants with major depressive disorder.⁷ Finally, in our research we found that, in comparison with participants who did not exhibit BPD symptomatology, those who did had a greater number of jobs since age 18, and were employed less overall since age 18, more likely to be paid 'under the table' and more likely to be fired from a job.⁸

Not all studies have reported negative findings, however. For example, McGlashan compared patients with BPD with patients with schizophrenia and unipolar affective disorder, and found that the former cohort worked more, and reported more

work complexity and higher competency scores.⁹ Modestin and Villiger investigated the outcomes of patients with BPD in comparison with patients with other personality disorders; there were no between-group differences with regard to working less than 20 h per week or being on disability.¹⁰ Among an Australian sample, Stevenson *et al.* examined time off from work from baseline to follow-up; participants with BPD experienced a significant decrease over the assessment points.¹¹ Finally, in a study in which researchers developed a specialized year-long treatment programme to specifically facilitate return to work or school, Comtois *et al.* reported considerable improvement in the percentages who were employed/in-school and employed at least 20 h per week.¹² However, despite these mixed findings, data generally suggest that patients with BPD are less employed than the general population. In this study, we examined another facet of occupational viability in terms of borderline personality symptomatology (BPS) – intentionally losing a job.

METHOD

Participants

Participants consisted of males and females, ages 18 years or older, recruited from an identical clinical setting (an internal medicine outpatient clinic that is staffed predominantly by resident providers) during four research projects that were undertaken over a 2-year period (2009–2011).^{13–16} We compiled these cross-sectional datasets to maximize the current sample size for investigation. The resulting sample consisted of 1493 patients: 491 males, 1001 females and one individual who did not indicate sex. Ages ranged from 18 to 97 years ($M = 50.79$, $SD = 15.64$), and 87.9% were White/Caucasian.

Procedure

During clinic hours, each incoming patient was approached by a research assistant, who excluded individuals unable to successfully complete a survey (mostly due to severe illness and/or language difficulties). With potential candidates, the recruiter reviewed the focus of the project and invited each to participate by completing a multi-page survey. In addition to demographic queries, we examined BPS through two self-report measures – the borderline personality scale of the Personality Diagnostic Questionnaire-4 (PDQ-4)¹⁷ and the Self-Harm Inventory (SHI), both with diagnostic scores of 5 or higher.¹⁸ As for inquiries about losing a job on purpose, SHI item 17 asks, ‘Have you ever intention-

ally, or on purpose, lost a job?’ As the focus of the current investigation, this item was not included in the total scoring of the SHI.

These four projects were reviewed and exempted by the institutional review boards of both the study site as well as the university. Completion of the survey was assumed to function as implied consent, which was explicitly clarified on the cover page of the booklet.

RESULTS

Of the 1493 respondents, 113 (7.6%) endorsed the item pertaining to losing a job on purpose, with no statistically significant difference between the proportions of males (9.2%) and females (6.8%) indicating such behaviour ($\chi^2 = 2.65$, $P < 0.12$). Point-biserial correlation coefficients revealed that those who endorsed losing a job on purpose tended to be younger ($r = -0.17$, $P < 0.001$), and scored higher on the PDQ-4 ($r = 0.33$, $P < 0.001$) and the SHI ($r = 0.48$, $P < 0.001$). Similarly, when compared with respondents who denied ever having lost a job on purpose, those who did were more likely to exceed the clinical cut-off score on the PDQ-4 (52.2% vs. 11.9%, $\chi^2 = 133.72$, $P < 0.001$) and the SHI (72.6% vs. 12.91%, $\chi^2 = 258.32$, $P < 0.001$).

We next examined whether the relationship between losing a job on purpose and scores on the PDQ and SHI were mediated by gender or age. In two multiple regression analyses in which gender, age and the item pertaining having lost a job on purpose were entered simultaneously as predictors of scores on the two measures of BPD, having lost a job on purpose remained independently predictive of scores on the PDQ ($\beta = 0.28$, $t = 11.58$, $P < 0.001$) and the SHI ($\beta = 0.35$, $t = 15.49$, $P < 0.001$). In other words, the relationship between having lost a job on purpose and scores on the measures of BPD remained statistically significant even after controlling for gender and age.

DISCUSSION

Findings indicate that one of the potential difficulties in clinically managing individuals with BPS may be their tendency to sabotage employment continuity, regardless of gender or age. Overall, in the treatment of borderline personality, high levels of life structure are traditionally indicated. Clearly, employment is one key area for enhancing life structure. Addressing this risk at the outset of clinical treatment may be of considerable importance in improving the life trajectories of these erratic individuals.

Importantly, the findings in this study may reflect a general tendency of individuals with BPD to engage in self-destructive behaviour; in other words, findings may not be workplace specific. In addition, the presence of mental illness may be a non-specific contributory factor as psychiatric disorders, regardless of type, are traditionally associated with lower socio-economic status.¹⁹

Although findings suggest that individuals with BPD are at risk for intentionally sabotaging their own employment, various factors may contribute to seeming self-sabotage. For example, individuals with BPD may wind up with low-quality jobs that are less tolerable. In addition, BPD is empirically associated with poor interpersonal functioning,²⁰ which may create unwarranted relationship distress in the work arena. Likewise, stigma towards the individual with BPD may intensify job pressures. In other words, some 'reverse causality' may be in effect.

This study has a number of potential limitations, including the self-report nature of the data (e.g. the use of a self-report measure for borderline personality; self-report measures for this disorder are known to be over-inclusive) and possible participant overlap in the four databases (given an annual average of 11 000 visits to the centre, this is less likely because of the 2-year study period). In addition, results focused on participants' response to a single item, rather than several items capturing a similar construct (one-item queries risk respondent misinterpretation). Despite these potential limitations, findings in this large and consecutive sampling of four studies indicate clear relationships between losing a job on purpose and BPS.

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