Intrusive memories are spontaneous, unwanted memories of negative autobiographical experiences that typically involve vivid imagery, but also often include olfactory and auditory sensations. They are a hallmark of PTSD, but are also commonly found in depressed and non-clinical populations. They are maintained through a cycle of negative appraisals and avoidant coping strategies in PTSD and depression, but this cycle has not been fully investigated in an unselected sample. The purpose of this project was to examine intrusive memories as they occur in an unselected sample of undergraduate students, including their phenomenological experience, how they are cognitively appraised, and the strategies used to cope with them. Specifically, negative appraisals and control appraisals were examined, as well as three types of coping strategies: problem-focused, emotion-approach, and emotion-avoidant coping. It was hypothesized that emotion-avoidant coping would be associated with increased intrusive memory frequency and that problem-focused and emotion-approach coping would be associated with decreased intrusive memory frequency. Further, it was hypothesized that negative appraisals and control appraisals would mediate the relationship between intrusive memory frequency and specific coping style utilization.

An ANOVA revealed that intrusive memory frequency was significantly associated with emotion-avoidant coping utilization but unrelated to problem-focused
and emotion-approach usage. Using hierarchical multiple regression and Baron and Kenny’s (1986) criteria for statistical mediation, negative appraisals and control appraisals were both determined to act as partial mediators of the relationship between intrusive memory frequency and emotion-avoidant coping, whereby increased intrusion frequencies were predictive of negative appraisals, low perceptions of control, and greater use of avoidant coping. The relationships were reduced by the inclusion of PTSD severity into the model; however, both negative appraisals and control appraisals remained significant partial mediators. Results suggest that intrusive memories, negative appraisals, low perceptions of control are not limited to clinical samples, and have implications for an alternative conceptualization of intrusive memories that is not dependent on clinical diagnoses. Limitations include use of an unselected sample, cross-sectional design, and reduced construct validity of a coping measure.